



The Tux Club Inc.

Membership Application



Home: _____

Cell: _____
 Phone Number

 Name (Print)

 Date of Birth

 Address

 Marital Status

 Spouses Name

 City, State, Zip Code

 Church Affiliation

 Email Address

 Affiliation Other Organizations

 Employment Status

 Affiliation Other Organizations

Reason for Joining the Tux Club Inc. _____

 Qualified Voter

 Vouching Members Name

 Joining Fee

 Joining Date

 Applicant's Signature

 Recording Secretary

Remarks _____

