

# Membership Form for Members Paying By Cash or Check

Please **PRINT** your name, address, telephone number, email address and additional names if this is a family membership.

New    Renewal    Individual \$20    Family \$25    Gift \$25    Cash    Check # \_\_\_\_\_

**Name** (add additional names for a family membership)

First \_\_\_\_\_ Last \_\_\_\_\_

First \_\_\_\_\_ Last \_\_\_\_\_

Primary telephone # \_\_\_\_\_

Second member's telephone # \_\_\_\_\_

Primary email: \_\_\_\_\_

Second member's email \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

Is there anything specific you hope to learn from our club? \_\_\_\_\_

\_\_\_\_\_

Skill Level (this helps us gauge our program for members):   Beginner \_\_\_ Intermediate \_\_\_ Advanced \_\_\_\_\_