

# BASCW MEMBERSHIP FORM

EXPIRES SEPTEMBER 30, 2023

ANNUAL DUES \$10 PER PERSON (Make checks payable to **BASCW**)

- PLEASE PUT FORM AND MONEY (cash or check) IN ENVELOPE AND THEN PUT THE ENVELOPE IN THE MAILBOX TO THE RIGHT OF THE DESK.
- PLEASE FILL OUT ALL INFORMATION. **PLEASE PRINT.**
- EMAIL ADDRESS WILL BE USED EXCLUSIVELY FOR CLUB NOTICES.
- QUESTIONS: Contact Judy at 218-234-1091 or [JJHORVICK@gmail.com](mailto:JJHORVICK@gmail.com)
- **Membership fees are not refundable.**

DATE \_\_\_\_\_

## PERSON #1

NAME AS IT APPEARS ON REC. CARD \_\_\_\_\_

NAME YOU PREFER IF DIFFERENT FROM NAME ON REC. CARD \_\_\_\_\_

MALE OR FEMALE (NEEDED FOR BOWLING DIVISION) \_\_\_\_\_

REC CARD # \_\_\_\_\_ **YOU MUST HAVE A REC. NUMBER TO JOIN THE CLUB.**

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_

EMAIL ADDRESS (**PLEASE PRINT**) \_\_\_\_\_

## PERSON #2

NAME AS IT APPEARS ON REC. CARD \_\_\_\_\_

NAME YOU PREFER IF DIFFERENT FROM NAME ON REC. CARD \_\_\_\_\_

MALE OR FEMALE (NEEDED FOR BOWLING DIVISION) \_\_\_\_\_

REC. CARD # \_\_\_\_\_ **YOU MUST HAVE A REC. NUMBER TO JOIN THE CLUB.**

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_

EMAIL ADDRESS (**PLEASE PRINT**) \_\_\_\_\_

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Office use:

Date \_\_\_\_\_ check or cash \_\_\_\_\_ check # \_\_\_\_\_ wel. letter \_\_\_\_\_ roster \_\_\_\_\_ transmittal \_\_\_\_\_ board email \_\_\_\_\_ CR-4 \_\_\_\_\_