



# Bowlers Association of Sun City West

## 2026/2027 Membership Form



Membership: Expires September 30, 2027

Annual Dues: \$15.00 per member [Make checks payable to **BASCW**]

- Complete all information below (please print clearly).
- Place completed form and dues (cash or check) in BASCW envelope and then drop in the BASCW Mailbox to the right of the Bowling Desk.
- Email address will be used exclusively for Club notices.
- **Note: Membership fees are not refundable.**
- Any questions: Please contact **Denise Rondeau** at (978) 221-8905 or [denise.rondeau@aol.com](mailto:denise.rondeau@aol.com).

Date: \_\_\_\_\_

### Member #1

Please check one: New Member \_\_\_\_\_ Renewed Member \_\_\_\_\_

NAME: \_\_\_\_\_ (as it appears on Rec. Card)

Preferred NAME: \_\_\_\_\_ (if different from name on Rec. Card)

Please check one: Male: \_\_\_\_\_ Female: \_\_\_\_\_

Rec. Card #: \_\_\_\_\_ (You must have a Rec. Card number to join the Club!)

Address: \_\_\_\_\_ Sun City West, AZ 85375

Phone #: \_\_\_\_\_ ( ) \_\_\_\_\_

Email Address: (PLEASE PRINT) \_\_\_\_\_

### Member #2

Please check one: New Member \_\_\_\_\_ Renewed Member \_\_\_\_\_

NAME: \_\_\_\_\_ (as it appears on Rec. Card)

Preferred NAME: \_\_\_\_\_ (if different from name on Rec. Card)

Please check one: Male: \_\_\_\_\_ Female: \_\_\_\_\_

Rec. Card #: \_\_\_\_\_ (You must have a Rec. Card number to join the Club!)

Address: \_\_\_\_\_ Sun City West, AZ 85375

Phone #: \_\_\_\_\_ ( ) \_\_\_\_\_

Email Address: (PLEASE PRINT) \_\_\_\_\_

Club Use: Date \_\_\_\_\_ Cash \_\_\_\_\_ Check # \_\_\_\_\_ Welcome \_\_\_\_\_ List \_\_\_\_\_ Trans \_\_\_\_\_ Board Email \_\_\_\_\_ CR-4 \_\_\_\_\_

BASCW No-Tap Events are sponsored by

