

SUBURBAN COMBINE

EST. 1966

New Member Application

Before applying for membership potential new members must live within the Combine boundaries.

Name:	Loft name:	Club:
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Address:

City:	State:	Zip Code:
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Home Phone:	Cell Phone:
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Email:	No Email or Internet <input type="checkbox"/>
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Emergency contact information:

Are you a new member or a past?	New <input type="checkbox"/>	Past <input type="checkbox"/>
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Prefer contact by:	Email <input type="checkbox"/>	Home Phone <input type="checkbox"/>	Cell Phone <input type="checkbox"/>	Text <input type="checkbox"/>
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List special skills if you would like to volunteer your time to help in Club or Combine.

Latitude: N ⁰ . '

Longitude: W ⁰ . '

Measure by: _____ / _____ / _____

Approved by _____ Club on ____/____/____

Officer Signature

Approved/ Denied by Combine on ____/____/____

Officer Signature