

APPLICATION FOR MEMBERSHIP

Date: _____

I hereby make application for membership in the South Broadway Athletics Club (S.B.A.C.)

Name _____ Age _____ Birth Month _____

Email Address _____

Residence _____ Phone # _____

City _____ State _____ Zip _____

Business address _____ Phone # _____

Occupation _____ Employer _____ No. Yrs. _____

Sponsoring members must accompany applicant to meeting of Board of directors and attest to applicants integrity and reputation. Upon approval of board of directors, sponsoring members Must then accompany applicant to a general meeting and attest to his integrity and reputation before the full body.

Falsification of any information on this application will result in immediate expulsion from the club.

Sponsoring Member _____ Years known _____

Sponsoring Member _____ Years known _____

Signature of Applicant _____

