

COLUMBIA BASIN BASS CLUB

2012 NEW/RENEWING MEMBER FORM

Membership fees are due in January. Please complete the form below and bring to our next meeting. If you cannot attend, then please mail the form along with your check (made to CBBC) to PO BOX 6881, Kennewick, Wa 99336

If you have any questions please call Jack Lochridge at (509) 727-8355

Check type of membership

 \$40.00 ---Family Membership
 \$25.00 --- Single Membership

Name: _____ Birthday: _____
Month & Day

Spouse: _____ Birthday: _____
Month & Day

Address: _____ Anniversary Date: _____

City & Zip _____ Home No: _____

E-mail: _____ Cell No: _____

Children – please include their birth month, day and year. This information will insure they are included in the newsletter.

Name: _____ Birth Date: _____ F___ M___

Name: _____ Birth Day: _____ F___ M___

Name: _____ Birth Date: _____ F___ M___

Name: _____ Birth Date: _____ F___ M___

Name: _____ Birth Date: _____ F___ M___

Name: _____ Birth Date: _____ F___ M___

New Club Member: Yes _____ No _____

Important Information:

You may obtain the newsletter on our website at: www.ColumbiaBasinBassclub.com

If you do not have an email address or still wish to have your newsletter mailed to you, please indicate below.

Check the line that describes how you prefer to receive your newsletter.

I DO wish to receive the newsletter by **email:** _____

I DO wish to receive the newsletter by **mail.** _____

I wish to pick up my newsletter at the monthly meeting. _____ **TURN PAGE OVER for LIABILITY**

For Club Use Only		
Amount	Check # or Cash	Date Paid