

Membership Form

NAME:				_
ADDRESS:				_
CITY:		_ STATE:	ZIP:	
EMAIL:			_	
TEMPLE/COURT N	IAME & NO.:			
POLO SHIRT SIZE:	S M	L XL_	2X	3X
NAME PREFERRED	ON SHIRT:			
METHOD OF PAYMENT: CASH CHECK/ MONEY ORDER AMOUN				AMOUNT\$
MEMBERSHIP FEE- \$75.00				
Make all	checks or money order	rs payable to: C	orey Thomas Bo	ooster Club
Return the form and payment to:				
	Dt. Tracy Parks		Noble Christopher Wims	
	6355 Covina Court	OR	1097 Ronald	Reagan Drive
	Montgomery, AL 36	5117	Fayetteville,	NC 28311
	1	DO NOT WRITE BELO	W THIS LINE	
Date Received: _	Amount:	\$	_ Receipt No.:_	
Received by:				