

# PORTLAND PETANQUE CLUB

## MEMBERSHIP APPLICATION

Name:

Address:

City: PORTLAND

State: OR

ZIP Code:

Email:

Phone(s):

Country of Citizenship: US

Date of birth:

Sex: (circle) M F

## INFORMATION FOR OTHER MEMBERS AT SAME ADDRESS

Name:

Sex: M F

Date of birth:

Name:

Sex: M F

Date of birth:

Name:

Sex: M F

Date of birth:

Name:

Sex: M F

Date of birth:

## EMERGENCY CONTACT

Name:

Relationship:

Phone:

## MEMBERSHIP TYPE (CHECK ONE)

Individual adult membership: \$35

Family membership: \$ 50, two adults residing at the same address

Junior membership: \$ 5, for members who will not have their 18th birthday in 2010

Secondary membership: \$ 25, already a primary member of another FPUSA club

\$ \_\_\_\_\_ Amount Submitted

### To use this Membership Application Form

1. If renewing, verify that information on upper lines is correct and correct on line just below if needed.
2. If new member, please complete all sections
3. Make your check payable to **Portland Petanque Club**
4. Mail the form and your payment to:

Joe Martin, Treasurer  
Portland Petanque Club  
PO Box 2833  
Clackamas OR 97015

Note for new members: Your license (membership card) will have your photo on it. We take photos at the clubhouse, or you can email a jpeg photo, about 150KB in size is fine, to portlandpetanque@aol.com. We will also be asking you to sign a standard sports waiver as part of your membership application.

2010

