



# Membership Application

NEW  RENEW

In the future would you prefer to receive the newsletter via  E-Mail or  Regular Mail ?

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Your Occupation: \_\_\_\_\_

Your Birthday: \_\_\_\_\_

E-mail: \_\_\_\_\_

Anniversary: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_

Spouse's Birthday: \_\_\_\_\_

Identical or Fraternal? \_\_\_\_\_

Expecting? Est. Due Date: \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

Please list the names of multiple children along with their birthdate and sex.

List siblings including their date of birth

What are you looking for in this club? \_\_\_\_\_

If not a native of Nevada, where did you move from? \_\_\_\_\_

Would you be interested in volunteering for the club? \_\_\_\_\_

Thank you for joining!

Please send this completed form and a check for \$30.00 annual dues to:

ELV/HD MOMC

PO Box 50098

Henderson, NV 89016

Membership Year runs July – June

Check us out at [www.vegastwins.com](http://www.vegastwins.com) for meetings and event information

OFFICE USE ONLY: Date _____ Pd: _____ Check # _____ Sent to Nat'l _____ New: Welcome Packet _____ Newsletter _____ Evite/Directory _____
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