JUST FOR FUN SQUARES **MEMBERSHIP APPLICATION/RENEWAL FORM**

2152 Stowbridge Rd, Dublin, OH 43016

Please print all information as requested. Please do not leave any blanks. Give form & dues to the Treasurer or mail it to the above address. Please date and sign your name in the space provided following the declaration statement.

NAME: _____ **D.O.B:** _____
(Last) (First) (M. I.) (Mo/Day)_

ADDRESS: _____
(Street) (Apt) (City) (State) (Zip Code)

PHONE: (_____)_____ /(_____)_____ **/ E-MAIL:** _____
(Home) (Cell)

(Phone will be listed in the roster as shown. Only note the numbers you want in the roster. Please place an "X" here ____ if you do NOT want your e-mail address listed in the Club Roster.)

IN CASE OF EMERGENCY, CONTACT: _____
(Name) (Phone Number) (Relationship)

BACK UP CONTACT: _____
(Name) (Phone Number) (Relationship)

You may be photographed for print, videotaped, or electronically imaged. Images may be used in promotional materials, news releases, and other published formats for Just for Fun Squares. The images will be the sole property of Just for Fun Squares.

SIGNATURE: _____ **DATE:** _____