

2012

APPLICATION FOR MEMBERSHIP

Name:

Address:

.....

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Phone Number :

Email Address :

D.O.B. if under 18:

Do you have a medical problem we should know about

.....

I am/am not a 3DAAA member YES NO.....

3DAAA Membership no.

APPLICANTS SIGNATURE:

To be signed by parent/guardian if applicant is under 18 years

Signature:

MEMBERSHIP DETAILS: (Please tick appropriate)

◆ ADULT	\$25.00	RENEWAL OF MEMBERSHIP	
◆ JUNIOR (13-17)	\$13.00		
◆ CUB (Under 12)	\$7.00	For Office Use Only:	
◆ FAMILY	\$60.00	NEW MEMBERSHIP:	YES/NO