

VALLEY VIEW RECREATION CLUB

APPLICATION FOR MEMBERSHIP

P.O. BOX 605 CAMBRIDGE, WISCONSIN 53523

APPLICATION DATE _____

NAME 1 _____ D.O.B. _____

NAME 2 _____ D.O.B. _____

ADDRESS _____

PHONE _____ CELL _____

EMAIL ADDRESS _____

CITY _____ STATE _____ ZIP _____

OCCUPATION 1. _____ 2. _____

WHY DO YOU WANT TO BECOME A MEMBER? _____

BASED ON LIFE AND JOB EXPERIENCES, CIRCLE THE COMMITTEES YOU MIGHT BE INTERESTED IN?

BUILDING AND GOUNDS

ENTERTAINMENT

GRIEVENCE

MEALS/DINNERS

NOMINATION
AUDIT

PLANNING

HOW LONG HAVE YOU BEEN COMING TO VALLEY VIEW? _____

LIST ANY OF THE MEMBERS YOU KNOW

ARE YOU A MEMBER OF PLEASE CIRCLE

AANR

TNS

NUMBER _____ CLUB ASSOC. _____ EXP _____

I UNDERSTAND THAT AS A MEMBER OF THIS CO-OP I AM EXPECTED TO ACTIVELY PARTICIPATE IN THE PROJECTS OF THE CLUB

INITIAL

DO YOU UNDERSTAND THE CONCEPT OF THIS CO-OP?

INITIAL

I HAVE RECEIVED A COPY & UNDERSTAND THE CLUB RULES _____ INITIAL

I HAVE RECEIVED A COPY OF THE CLUB BY LAWS/RULES _____ INITIAL

I WOULD BE INTERESTED IN A CAMPING SITE: PLEASE CIRCLE YES NO

ITEM	AMOUNT DUE
FULL MEMBERSHIP SINGLE	\$
FULL MEMBERSHIP COUPLE/FAMILY	\$
ASSOCIATE MEMBERSHIP	\$
AANR DUES	\$
RV SITE FEE	\$
TENTING SITE FEE	\$
STUDENT MEMBERSHIP	\$
OTHER	\$
TOTAL AMOUNT DUE	\$

NOTE:
PAYMENT DUE UPON SUBMISSION OF APPLICATIONS, CHECK, CASH OR CREDIT CARE WILL BE PROCESSED UPON ACQUIRING MEMBERSHIP.

CHECK # _____ CASH _____

CREDIT CARD # _____ EXP _____

1. SIGNATURE _____

2. SIGNATURE _____

MEMBERSHIP CHAIR _____ DATE _____

COMMENTS