

Ravens Roost #82

Application for Membership

NAME OF APPLICANT: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

HOME PHONE: _____ WORK PHONE: _____

MARRIED _____ SINGLE _____ DATE OF BIRTH _____

EMPLOYED BY: _____

SPONSORING MEMBER: _____

HAVE YOU EVER BELONGED TO THIS OR ANY OTHER ROOST OR CORRAL? _____

IF YES, PLEASE LIST ROOST OR CORRAL NUMBER(S): _____

DO YOU HAVE SEASON TICKETS? _____ IF SO, WHERE? _____

WHY DO YOU WANT TO JOIN THIS RAVENS ROOST? _____

Applicant – Please Read Before Signing This Application

THE OFFICERS, MEMBERS, AND ORGANIZATION OF THIS ROOST WILL HOLD ALL INFORMATION SUPPLIED ON THIS APPLICATION IN THE STRICTEST CONFIDENCE. BY AFFIXING MY SIGNATURE BELOW I AGREE TO ABIDE BY AND UPHOLD ALL BYLAWS AND REGULATIONS, PRESENT AND FUTURE, OF THIS RAVENS ROOST. IF MEMBERSHIP IS DENIED, ALL APPLICATION FEES WILL BE RETURNED. UPON LEAVING THE RAVENS ROOST, BY VIRTUE OF RESIGNATION OR BEING DROPPED FROM MEMBERSHIP, NO REFUND OF PAID DUES OR CLAIM ON CLUB PROPERTIES OR ASSETS SHALL BE MADE BY ME OR ANY MEMBER OR REPRESENTATIVE OF MY ESTATE. DUES ARE DUE WITHIN 60 DAYS OF ACCEPTANCE OR MEMBERSHIP WILL BE REJECTED AND APPLICATION FEE FORFEITED.

Applicant Signature: _____ Date _____

Sponsor _____

FOR OFFICIAL USE ONLY

DATE SUBMITTED TO BOARD _____ MEMBERSHIP CHAIRMAN _____

DATE INTRODUCED TO MEMBERSHIP _____ APPLICATION FEE PAID _____

DATED VOTED ON BY MEMBERSHIP _____ ACCEPTED _____ DENIED _____

DATE NOTIFIED BY MEMBERSHIP CHRM. _____ FIRST YEARS DUES _____ PAID _____

Membership@ravensroost82.com

By Laws of Ravens Roost #82 _____

PROPOSAL FOR BYLAW CHANGE

Submitted By: _____

Date: _____

Received By: _____

Date: _____

Current Wording: (List Article and Section)

Proposed Change:

Sent to Board of Directors: ___ / ___ / ___

Approved: ___ / ___ / ___

1st Reading ___ / ___ / ___

2nd Reading ___ / ___ / ___

Date of Membership Vote ___ / ___ / ___

Votes For _____

Votes Against _____