



# WAHOO CLUB APPLICATION FOR MEMBERSHIP

### Dues Structure:

\$15.00 (Youth, 14 & Under)    X \_\_\_ = \$ \_\_\_

\$25.00 (Single Member)    X \_\_\_ = \$ \_\_\_

\$35.00 (Married Couple)    X \_\_\_ = \$ \_\_\_

\$45.00 (Family)    X \_\_\_ = \$ \_\_\_

\_\_\_ Renewal    \_\_\_ New Member    \_\_\_ Status Change

Year: 2015

Date Paid \_\_\_\_\_

Check # \_\_\_\_\_

Amount \$ \_\_\_\_\_

### Please Check Status

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Y \_\_\_ S \_\_\_ M \_\_\_ F \_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Y \_\_\_ S \_\_\_ M \_\_\_ F \_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Y \_\_\_ S \_\_\_ M \_\_\_ F \_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Y \_\_\_ S \_\_\_ M \_\_\_ F \_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Y \_\_\_ S \_\_\_ M \_\_\_ F \_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (Daytime) \_\_\_\_\_ Phone (Other) \_\_\_\_\_

E-mail \_\_\_\_\_ Fax \_\_\_\_\_

Send application and  
Check payable to:    The Wahoo Club  
                                  C/O Membership  
                                  PO Box 221142  
                                  Cleveland, Ohio 44122