

Membership Application
Circus Saints and Sinners Club of America
Bob Prince Tent

Applicant Information

Name:		
Date	Home Phone:	Bus. Phone:
Home address:		Fax No.:
City:	State:	Zip:
Email address:		

Clubs/Organizations/Associations

Special Interests

Please circle your interests for upcoming events and involvement.

Sports	Progressive Dinner	Guest Speakers
Horse Racing	Fundraising	Ethnic Parties (Oktoberfest)

List any other interests:

Member Recommendation

I certify that the applicant is known to me personally and recommend him for membership.

Print Name:

Proposed by member	Endorsed by member
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Agreement

If elected, I agree to abide by the rules and regulations set by the board of directors of the Bob Prince Tent.

Signature of Applicant:	Date:
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Membership Committee Report:

Elected by Executive Committee on _____, 200__

Chairman's Signature	Certified by Secretary's signature
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