

TWO TEN TOWN CLUB

210 PINE STREET P.O. BOX 664
JAMESTOWN, NY 14702-0664
(716) 664-6210
(716) 483-3656 fax
info@townclub210.com
www.townclub210.com

MEMBERSHIP APPLICATION

Application is hereby made by the undersigned for the Social Membership in the **TOWN CLUB OF JAMESTOWN, INC.**
One year's membership dues must accompany this application. Membership will become effective upon acceptance by the membership committee and is renewable each November.

Annual Membership: \$ 250.00

Initiation Fee: *waived*

Tax: 7.75 % \$ 19.38

TOTAL DUE \$ 269.38

MEMBER INFORMATION:

Full Name: _____ E-mail address: _____

Date of Birth: _____ Home Phone #: (____) _____ Cell Phone #: (____) _____

Address: _____ City: _____ State: _____ Zip: _____

Spouse's Name: _____ Spouse's e-mail: _____

Spouse Date of Birth: _____ Anniversary: _____

Bill to Address: Home Office # of Membership Cards needed: _____

Newsletter Address: E-mail Home Office

BUSINESS INFORMATION:

Company: _____ Length of Service: _____

Position: _____ Phone #: (____) _____

Address: _____ City: _____ State: _____ Zip: _____

Applicant Signature: _____ Date: _____