

MEMBERSHIP APPLICATION
State College Singles Club (SC)²
Mail to: Box 452, State College, PA 16804

Name: _____ Date: _____

Street/City/State/Zip: _____

Home Phone: _____ Work Phone: _____

E-Mail: _____ Birthday month: ___ day: _____

(SC)² has permission to publish in a membership directory (distributed to members only) my:

Name: yes no Home phone: yes no Birthday: yes no

Address: yes no Work phone: yes no E-mail: yes no

Membership: new renewal (\$25 **prior to January 1**, otherwise prorated
by quarter according to the schedule below)

Join during: Fee:

Jan-Mar \$30

Apr-Jun \$25

Jul-Sept \$20

Oct-Dec \$15

Notes: membership required after attending **three** events
membership year is from Jan. 1 to Dec. 31
new members announced in newsletter unless
otherwise requested.

For (SC)² Officer Use Only:

Send current newsletter Add to mailing list Dues to Treasurer Add to birthday list

Add to membership listings Mail membership listing

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