



CLUB 63 NORTH RETIREE MEMBERSHIP APPLICATION FORM

EMPLOYEE NUMBER:

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RETIREE NAME:

Last name First name

I would like to join Club 63 North. This form, along with my non-refundable dues of \$25 are enclosed.

Paid by: ___ Cash ___ Cheque CC# _____ expiry ___/___

TERM: _____, 201__ TO _____, 201__

HOME ADDRESS:

street city province postal code

HOME PHONE #: (_____) _____
Area code

**CHEQUES ARE MADE PAYABLE TO CLUB 63 NORTH AND SENT TO MAIL DROP 5200, OR
PAYMENT CAN BE MADE BY VISA OR MASTERCARD. SHOULD YOU HAVE ANY
QUESTIONS, PLEASE CONTACT THE OFFICE @ 790-6268**

FOR CLUB OFFICE USE ONLY:

Card/Information Issued:

Date: _____ *Signature:* _____