

2022

Renewal Membership Application

(Required Fields: Name(s) and any changes from last application)

Name:	Birth Month/Day
	Birth Month/Day
	Birth Month/Day
	Birth Month/Day
Address:	
City:	State: Zip:
Phone:	(Home 🖵 Work 🖵 or Cell 🖵)
Email:	
Name as you would like it on you	r badge (i.e. nickname)
Addit	tional Family Members
I am internet enabled (Email	newsletter, etc) NO (Mail newsletter, etc)
I am interested in helping on a co	newsletter, etc) NO (Mail newsletter, etc) mmittee YES NO mbership Newsletter Planning Raffles that would be of help to the club?
I am interested in helping on a co	ommittee YES NO mbership Newsletter Planning Raffles
I am interested in helping on a communication of the communication of th	mbership No mbership Newsletter Planning Raffles s that would be of help to the club? need newsletter, etc. mailed) 5.00 (for each member at same mailing address)
I am interested in helping on a community of the contribution is not deductible.	mbership No mbership Newsletter Planning Raffles s that would be of help to the club? need newsletter, etc. mailed)

Make check out to Desert Sharks PHC and mail check and application to:

Desert Sharks PHC C/O Dan Dutton Membership Chair 504 N. Daystar Mountain Dr. Tucson, Arizona 85745

To Be Filled In By Membership Chairman		
Date Paid	Check #	
Amount Paid: \$	Total Members	