



| DO NOT W | IOT WRITE IN THESE SPACES | | | |
|----------------|---------------------------|--|--|--|
| DATE | | | | |
| AMOUNT PAID | | | | |

FY2020

APPLICATION FOR RENEWAL OF MEMBERSHIP

| ☐ Update Needed |
|--|
| Above is the Club's record of your address, phone number, and email address. If any of the information is incorrect or missing, please check the "Update Needed" box above and make the necessary corrections in the space on the back. |
| If renewing a Family Membership, legibly list all those covered on the reverse, including DOB, Phone, and Email. Family memberships cover only those living under one roof. |
| If you have not given us your email address so you can receive our monthly newsletter and important announcements, consider this: to print and mail costs the Club about \$1.00, to send a copy via email costs us nothing! |
| CURRENT ANNUAL DUES TYPE OF MEMBERSHIP YOU ARE RENEWING |
| Regular (18yrs+)\$125.00 |
| Spouse\$25.00 |
| Junior (under 18yrs)\$10.00 |
| Family\$250.00 |
| The Club's Fiscal year begins September 1st and dues become payable on that date. Dues must be paid up in order for you to vote in the Election of Officers, which this year is September 16th. |
| The Club recognizes that it's members occasionally suffer financial setbacks. In these cases, special arrangements can be made. Please contact a Club officer for details if you are considering dropping your membership because of financial difficulties. |
| Dues are required by September 1st each calendar year. |
| By November 1st, if dues are not received, you are considered an inactive member not in good standing and a \$25 late fee will be assessed. If current dues are not received by January 1st, you be deemed an ex-member will need to rejoin SRGC, Inc. by paying current dues plus Initiation Fee. |
| THIS RENEWAL MUST BE ACCOMPANIED BY YEARLY DUES |
| |
| Signature: Date: |

INFORMATION UPDATE

| NAME: | | | |
|----------|--|---------------|-----|
| ADDRESS: | CITY | STATE | ZIP |
| | AGE: D | | |
| EMAIL: | ENTER AN EMAIL ADDRESS TO RECEIVE MONTHLY NEWSLETT | FER VIA EMAIL | |
| FAMIL | Y MEMBERSHIP COVER | AGE LIST | |
| NAME: | | | |
| PHONE: | D | OB: | |
| EMAIL: | | | |
| NAME: | | | |
| PHONE: | D | OB: | |
| EMAIL: | | | |
| NAME: | | | |
| PHONE: | D | OB: | |
| EMAIL: | | | |
| NAME: | | | |
| | | OB: | |
| EMAIL: | | | |
| NAME: | | | |
| | D | | |
| EMAIL: | | | |
| NAME: | | | |
| | D | | |
| FMAII: | | | |