

MEMBERSHIP FORM

Name:		
Address:		
City:	State:	Zip Code:
Phone:	Email:	

DUES

Adult	\$200 _____
Junior Due (Under 21 w/no voting privileges)	\$50 _____
Junior Due (Sundays Only)	\$20 _____
1st Year Member (non-member for past 5 years)	\$100 _____

LEAGUE INFORMATION

There is a minimum of four and a maximum of seven players per team

Players may be listed on only one roster per league

No time preference for any league other than Matinee

(check all that apply)

Monday Men's Senior		Team name:
Monday Men's		Team name:
Tuesday Ladies AM		Team name:
Tuesday Mixed		Team name:
Wednesday Open		Team name:
Thursday Mens Matinee 3:30 5:00		Team name:
Thursday Ladies Evening		Team name:

Signature of applicant:	Date:
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Please bring this completed form to registration night or mail to:

Hibbing Curling Club
 PO Box 357
 Hibbing, MN 55746

PLEASE SIGN WAIVER ON THE BACK OF THIS MEMBERSHIP FORM!