RHODE ISLAND CLUB MEMBERSHIP INPUT FORM

(Please Print Clearly, we need to be able to read your data for Club communications)

First Member Info	ormation			Member				
Member Last Name		Member First Name	Member First Name Nic		Member Hometov	vn City	State	
Second Member	Information	on						
Partner Last Name		Partner First Name	Nic	Partner kname on Badge	Partner Hometown City		State	
Villages Address	Informati	on						
Stre	eet							
Z	Zip							
Village								
Telephone Information Cell Phone]	Check One Box			
						Hers		
Home Phone			○ Both ○ I		○His ○	Hers		
Other Phone					○Both ○His ○			
						Hers		
email Information	n		Ple	ase Check One B	ox per email	Use this ema		
email1			Home His Hers		corresponde	ence		
						○ No		
email2				Home His Hers No				
Notes								
Payment Information To be filled in by membership committee								
Date	Paid							
AmtPaid O		Check Cash		First Member Assigned RICN				
MethodPaid CheckNumber		JOHECK JOASH		Second Member Assigned RICN				