

LAKES AREA BIKE CLUB

MEMBERSHIP REGISTRATION

NAMES(s) _____

Address _____

City _____ State _____ Zip Code _____

Home Phone Number _____

Cell Phone Number _____

Email Address @ home _____

Email Address @ work _____

Single Membership Fee \$10 _____ Family Membership Fee \$15 _____

If you prefer to not share any of this information with our club members or with our participating bicycle shops, please indicate with a check mark in this space _____.

We try to communicate with our members in the best way possible. We understand that some employers do not want their email system to be used for private information. The Club respects that right.

Note: The membership fee is used to support the Club's website. You may be asked to submit the fee again at a later date if funds are needed to keep the website active or to make improvements in the data that is presented. We thank you for considering joining the Lakes Area Bike Club.

Signature of applicant(s) _____

Date _____

Please return the completed form to Pam Hanson, 608 12th St NW Perham, MN 56573-2059