

**LAKE WYLIE SHAG CLUB**  
**Application**

**New Member** \_\_\_\_\_

**Renewal** \_\_\_\_\_

\*Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

\*Name: \_\_\_\_\_

Birthday mo/day: \_\_\_\_/\_\_\_\_

\*Spouse/other \_\_\_\_\_

Birthday: mo/day \_\_\_\_/\_\_\_\_

\*Address: \_\_\_\_\_

\*

City: \_\_\_\_\_ \*State; \_\_\_\_\_ \*Zip: \_\_\_\_\_

Phone: \_\_\_\_/\_\_\_\_/\_\_\_\_ Unblocked Email: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Type of Work: \_\_\_\_\_

How did you learn of about LWSC? \_\_\_\_\_

Would You Like to Serve on a Committee? \_\_\_\_\_

IF YES Please Check All that Apply.

Social \_\_\_\_\_ Membership \_\_\_\_\_ News Letter \_\_\_\_\_ Decoration \_\_\_\_\_

Fund Raisers \_\_\_\_\_ Telephone \_\_\_\_\_ Publicity \_\_\_\_\_ Ways & Means \_\_\_\_\_

Club Sponsors: \_\_\_\_\_

Hobbies or Interests: \_\_\_\_\_

\_\_\_\_\_

\*SIGNATURE: \_\_\_\_\_

\*....should be filled in

Membership is **\$20.00** per year for each member. Membership renewal for current members is **\$15.00** a year if paid the January meeting. After the July meeting, the membership fee will be **\$10.00**. Thank you for your interest in joining our club. You may give this application to any current member, bring it any LWSC function, or mail it with check to:

Lake Wylie Shag Club  
PO Box 3415  
Fort Mill, SC 29708