

2021 NEOTT MEMBERSHIP APPLICATION

(PLEASE PRINT LEGIBLY)

RENEWAL: _____ NEW MEMBER: _____

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE : _____ WORK PHONE: _____

CELL PHONE: _____ EMAIL: _____

SHIRT SIZE: _____

IMMEDIATE FAMILY MEMBERS ARE ENTITLED TO MEMBER BENEFITS AND MAY ENTER COMPETITIONS AT MEMBER RATE.

FAMILY MEMBERS: _____

EMERGENCY CONTACTS: (LIST ANY ADDITIONAL ON BACK OF FORM)

NAME: _____ RELATIONSHIP: _____

HOME PHONE: _____ WORK PHONE: _____

CELL PHONE: _____

IF YOU HAVE ANY SPECIAL INTERESTS OR RESOURCES TO OFFER. PLEASE LIST THEM ON REVERSE SIDE OF THIS FORM.:



ANNUAL DUES: \$40

SUBMIT THIS FORM IN-PERSON TO

MEMBERSHIP COORDINATOR :

ELDON MALONE

SEE THE CLUB WEBPAGE AT WWW.NEOTT.COM

JOIN THE NEOTT MAILING LIST THROUGH WWW.FACEBOOK.COM (SEARCH FOR NEOTT)