## Membership Application (Rev 07/20)

Albany, NY									_			
Last Name								Suffix				
First Name								MI		Member #		
Address 1										Date Pd		
Address 2	ddress 2									Amt Pd		
City										Cash, Check or PayPal (circle)		
State		ZIP Committee Use Only							Dnly			
Home Phone Cell Phone										Date of Birth	:	
Occupation					el	Mail:						
Male		Dow	Downhill		Non-Skier		Bike,	Road		Scuba Diving		
Female	2	Cross Country			Volleyball		Bike,	Mountain				
Marrie	d	Snowboard			Golf		Moto	rcyclist				

I have read, understand, & agree to abide by the Constitution, By-Laws and Policies of the OC Ski Club. Please check this box to allow us to accept your typed name on the line below as your electronic signature

Paddler

Hike

## Please Sign Here:

Single

How did you hear about the OC Ski Club?

Please check one:

A Friend	I was a guest
Website	Newsletter
Facebook	Warren Miller movie
Local Ski Shop	OC Button
Brochure	Ski Expo or another event

Other \_\_\_\_\_

Please fill out this form and either:

Telemark

1. Print, sign and mail it with a check (payable to OC SKI CLUB) in the amount of \$41 (mailed) AND a copy of ID to:

OC SKI CLUB, Membership Committee, PO Box 13901, Albany, NY 12212

2. Email it, and a picture/copy of your ID, to Membership@ocskiclub.org at the time that you pay your dues via PayPal using the link on the Website.