

## Aiken Bridge Club Membership Registration/Change Form

**Please Print Name:**

Last: \_\_\_\_\_ First: \_\_\_\_\_ Birthday: Month: \_\_\_\_\_ Day: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ -- \_\_\_\_\_ -- \_\_\_\_\_ Cell: \_\_\_\_\_ -- \_\_\_\_\_ -- \_\_\_\_\_

Email Address: \_\_\_\_\_ ACBL No. : \_\_\_\_\_

**Year 202\_\_\_\_\_ Today's Date: \_\_\_\_/\_\_\_\_/202\_\_\_\_**

**Membership Fee 10.00**

ABC Bridge Club: Date Paid: \_\_\_\_/\_\_\_\_/202\_\_\_\_ Check # \_\_\_\_\_ Cash \_\_\_\_\_ Amount Received \$ \_\_\_\_\_

Data Entered: Spreadsheet: \_\_\_\_\_ Website: \_\_\_\_\_

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**Membership Fee \$10.00**

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