

## 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 \$5.00**

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

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

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