



## Carolina Coast Surf Club, Inc.

PO Box 161, Sullivan's Island, SC 29482

### Membership application

Please complete this application and mail it with your check to the above address. If applying for a family membership, have each family member complete a separate application and attach to the main application.

Full legal name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Mailing address: \_\_\_\_\_  
\_\_\_\_\_

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_ E-mail \_\_\_\_\_

Applying for: (check one)      **Note:** Dues are for one year, June 1 through May 31

**Family:** \$100/year (new membership includes two hats and two t-shirts)

**Adult:** \$50/year (new membership includes one hat and one t-shirt)

**Student:** \$25/year (under 21 years of age) (new membership includes one hat and one t-shirt)

T-shirt size: \_\_\_\_\_ Cap size: adult \_\_\_\_\_ child \_\_\_\_\_

Membership fee: \$ \_\_\_\_\_

Total amount due: \$ \_\_\_\_\_

Please tell us about yourself in a few short sentences (family, work, hobbies, etc). \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you willing to help with club functions or projects? Yes  No

By signing below, I agree to abide by all club rules and regulations.

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Printed name of applicant: \_\_\_\_\_