

Gator Clowns Membership Application/Update 2012



Name: _____ Clown Name _____

Address: _____

2ND Adult Clown _____

Home Phone # _____ Work Phone//cell # _____

Email address _____

Best Time to Clown: Week Days: _____ Week Nights: _____

Saturday _____ Sunday _____

I am willing to serve on a committee: _____

I could use some help with (clown talent) _____

In Case of Emergency Notify: _____

Relationship: _____

Phone _____ Address _____

DUES

Cash _____ Check# _____ Total _____

Type of Membership: \$25 - Single _____ \$35 - Family _____

Number of tag-a-longs in family (children under 18 living at home) _____

Name and ages of tag-a-longs _____

***Note:** Update and dues must be returned to membership Chairman by February 1, 2012 or your name will not appear on the roster. February Newsletter will be the last one you will receive if dues are not paid by this date.

Cost of Name tags are not included in renewal

Membership chairman.

Carol "Sprinkles" Jennings, 904-699-6846, 904-502-5146

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