

# SHORELINE CYCLING CLUB

## MEMBERSHIP FORM

DATE: \_\_\_\_\_

MEMBERSHIP TYPE:   \_\_\_ INDIVIDUAL   \_\_\_ FAMILY   \_\_\_ BUSINESS

FIRST NAME: \_\_\_\_\_

LAST NAME: \_\_\_\_\_

SPOUSE FIRST NAME: \_\_\_\_\_

SPOUSE LAST NAME: \_\_\_\_\_

ADDRESS LINE 1: \_\_\_\_\_

ADDRESS LINE 2: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

RIDING INTERESTS:   OFFROAD:   \_\_\_ Casual   \_\_\_ Fitness   \_\_\_ Racing

                          ROAD:   \_\_\_ Commuting   \_\_\_ Casual   \_\_\_ Tours   \_\_\_ Fitness   \_\_\_ Racing

Individual membership   \$20.00/yr

Family membership       \$30.00/yr

Business membership     \$100.00/yr

Make checks payable to: Shoreline Cycling Club

Send to: David Maclean  
6984 Partridge Circle  
Ludington, MI 49431  
kdmaclean@frontier.com