

Salem~Keizer Newcomers' Club

Membership Form 2026-2027

Membership use only:

Check #: _____

Amount _____

Date: _____

Cash: _____

Are you a New Member? _____ Please fill out all parts of this form.

Are you Renewing? _____ If your information in the 2025-26 roster is correct, just **PRINT your name, fill out the Dues section, sign and mail this form with your payment to the address below.**

Board Notification _____

Member Information ~~ Please PRINT Legibly

Name _____

Cell Phone: _____ Home Phone (if different): _____

Home Address: _____ City: _____ State: _____ Zip: _____

Mailing Address if different: _____

Email: _____ Birthday Month: _____ Day: _____ Spouse Name: _____

New Member: Did you move from another area? _____ From Where? _____

How did you learn about our club? _____

New Members: Please mark with an "X" any activities listed below that are of interest to you

- | | | | |
|--|--|---------------------------------------|--|
| <input type="checkbox"/> Afternoon Tea | <input type="checkbox"/> Dine-Outs | <input type="checkbox"/> Junkets | <input type="checkbox"/> Stitch 'n Bitch |
| <input type="checkbox"/> Book Clubs | <input type="checkbox"/> Discussion Groups | <input type="checkbox"/> Mah Jongg | <input type="checkbox"/> Trivia Night |
| <input type="checkbox"/> Bridge | <input type="checkbox"/> Game Day | <input type="checkbox"/> Pinochle | <input type="checkbox"/> Other |
| <input type="checkbox"/> Bunco | <input type="checkbox"/> Wine Groups | <input type="checkbox"/> Salad & Such | _____ |

Annual Membership Dues Payment (July 1 through June 30)

Membership Dues - \$25.00\$ 25.00

Email Newsletter - No Charge\$ 0.00

Hardcopy of Newsletter - add \$15.00\$ _____

Total payment enclosed\$ _____

Membership for new members joining in May or June will continue through June 30 of the following year.

Make checks payable to:

• S-K Newcomers' Club

Mail form and payment to:

• Membership Director

S-K Newcomers' Club

PO Box 13545

Salem, OR 97309

As a member of S-K Newcomers' (SKNC) you agree to comply with the adopted Bylaws and Standard Operating Rules that are printed in the annual Roster. Members and their guests assume responsibility for any loss or injury suffered in connection with any SKNC activity. By listing your email address, you give the Club permission to send you official club business by email.

Signature _____ Date _____