



# THE SHENANDOAH CLUB

*"All Are Welcome"*

## Tell us a bit about yourself...

What is your Full Name? \_\_\_\_\_

What is your E-mail? \_\_\_\_\_

Phone Number (s) Cell \_\_\_\_\_ Office \_\_\_\_\_ Home \_\_\_\_\_

Circle preferred contact #

When is your birthday? \_\_\_\_\_

(must be 21 or older to apply)

What's is your home address? City/State/Zip \_\_\_\_\_

Work Information Company Title \_\_\_\_\_ Address \_\_\_\_\_

Retired  Yes  No

Spouses and adult couples living in the same household may join under the same membership for no additional charge.

## If you are joining with a spouse or partner, tell us a bit about them

Name \_\_\_\_\_

What is his of her E-mail? \_\_\_\_\_

Phone Number (s) Cell \_\_\_\_\_ Office \_\_\_\_\_ Home \_\_\_\_\_

Circle preferred contact #

When is his or her birthday? \_\_\_\_\_

Work Information Company Title \_\_\_\_\_ Address \_\_\_\_\_

Retired  Yes  No

## How do you prefer to receive information from the Club?

E-mail  US Mail  Both

Do you authorize this information to be included in the Club directory?  Yes  No

How would you like to receive your Monthly Statement?  Home Address  Work Address  E-mail

Membership Category:  Resident  Junior (under 45)  Non-Resident

## We'd like to get to know you...

Providing the following information is optional. The information will help the Club serve you better and enhance your use and enjoyment of the Club by helping you connect with your fellow members.

Hobbies/Special Interests (You)

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Hobbies/Special Interests (Partner or Spouse)

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Please check all of the following "Clubs Within a Club" that would be of interest to your household. Where possible, indicate the name (s) of the interested party (ies):

- Book Group
- Bridge
- Classic Movie Group
- Crafts
- Family Friendly Events
- Fine Arts
- Gourmet Dining Events
- Hands-on Cooking
- Health and Wellness
- History
- Movement and Exercise
- Performing Arts
- Travel
- Whiskey and Other Spirits
- Wine and Beer

I agree to be bound by the Bylaws of the Shenandoah Club. I agree to pay all associated membership charges.

Signature: \_\_\_\_\_ Date \_\_\_\_\_