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| Davis Diamonds Parent ClubVoting Membership Application2018-2019 | | | | | |
| Applicant Information | | | | | |
| Name: | | | | | |
| Current address: | | | | | |
| City: | State: | | | ZIP Code: | |
| Cell Phone:  text OK \_\_ | Secondary Phone: | | | email: | |
| Preferred mode of contact: | \_\_ text | | | \_\_ email | |
| Spouse Information if joint membership | | | | | |
| Name: | | | | | |
| Cell Phone:  text OK \_\_ | Secondary Phone: | | | email: | |
| Preferred mode of contact: | \_\_ text | | | \_\_ email | |
| Children Enrolled | | | | | |
| Name: | | | Level/Class: | | |
| Name: | | | Level/Class: | | |
| Name: | | | Level/Class: | | |
| Committee/Volunteer interests | | | | | |
| I would be interested in serving on committees or volunteering in one or more of these areas: | | | | | |
| \_\_ Meet Planning/Coordination | | \_\_ Fundraising | | | \_\_ Publicity/Social Media |
| \_\_ Membership | | \_\_ Social Events | | | \_\_ Leadership |
| \_\_ Recreational/Team Liaison (mark level preferred):  Recreational JO Girls 2-5 JO Girls 6-10 Xcel JO Boys 4-5 JO Boys 6-10 | | | | | |
| \_\_ Other (please list): | | | | | |
| Signatures | | | | | |
| Signature of applicant: | | | | Date: | |
| Signature of spouse *(only if for a joint membership):* | | | | Date: | |

Suggested donation for membership is $10, to be renewed annually.