## **Holmdel Half Century Club**

## **Application For Membership**

Name			
Address			
lephonee-maile-mail			
As a resident of Holmdel Township membership in the Hoimdel Half C	• • • •	hereby make my application for	
His Date of Birth-Month Day	/Year		
Her Date of Birth-Month Da	y Year		
To assist in programming, please a	answer the following Questio	ons	
L How did you hear about the club	0?		
2. What activities are you interest	ed in? Please circle-		
Day Trips Longer Trips Singing Dancing Games Bridge	Service Projects Lecture Speakers Public Speaking Antiques Computers Other	Nature Woodcraft Chess Special Classes Painting	
Annual dues are \$25 a year (\$30 fo to be paid by check only.	or a non-resident who is grar	ndfathered in) from January to Decemb	ber
Signature	Date_	Check	#
Please make check payable to Hol	mdel Half Century Club & ma	ail to:	
	Francine Campis 2 Country Squire Lan Holmdel, New Jersey 07 Tel.# 732-778-3750	7733	
Ignore the following if you alread	y paid:		

There will be a \$5.00 Surcharge if your dues are not paid by January 31<sup>st</sup>. This surcharge does not apply to a new member currently applying for Membership. This surcharge only applies to past members who do not pay their dues on time. Dues run from January 1% to December 31<sup>st</sup> not from the day you join.