

RANDOLPH SKI CLUB NEW MEMBERSHIP APPLICATION

Complete and return to:

**Suzanne Cutler
PO Box 850302
Braintree, MA 02185**

617-549-5829, randolphskiclub@hotmail.com

Name: _____

Address: _____

Date of Birth: _____

Marital status: _____

Occupation _____

Home phone number (____) _____

Work phone number (____) _____

Cell number: (____) _____

E-mail address _____

Committee Preference: Lodge Repair House Supply Membership Summer Club
(PICK ONE)
 EISCL Representative Race Committee Social

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Please complete the following section.

References (please list names of current or past club members):

Primary Interest: Alpine X-Country Snow Boarding

Level: Novice Beginner Intermediate Advanced Expert Professional

Summer Sports Interests:

Have you been or are you currently a member of another EICSL ski club?

Have you ever been denied membership to another EICSL ski club?

I, the undersigned, as a Member of the Randolph Ski Club, Inc. agree to abide by the Constitution and Bylaws at all times during the course of my membership. I also understand that the constitution and the Bylaws may be altered, amended or repealed at any time by the Full membership and I agree to abide by any change made. I hereby certify, by my signature, that I am at least 21 years of age or older.

SIGNATURE: _____ DATE _____

SUBMIT, ALONG WITH THE \$25.00 APPLICATION FEE, TO THE ABOVE ADDRESS.