

# San Joaquin Valley Rangers

PO Box 31074  
Stockton, CA 95213  
www.sjvr.info

## Membership Application

Please print/type all information legible  
When the applicant(s) apply for membership(s) they shall pay the dues.  
All information must be completed or the application will be returned.

<u>Name</u>	<u>Birthdate</u>	<u>Membership Type</u>		
1 _____	_____	S	J	C
2 _____	_____	S	J	C
3 _____	_____	S	J	C
4 _____	_____	S	J	C
5 _____	_____	S	J	C
6 _____	_____	S	J	C

Mailing Address: \_\_\_\_\_ apt #: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

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Senior Member (s)	\$30.00 x _____	Member(s) = \$ _____
Junior Member(s) (9-17)	\$5.00 x _____	Member(s) = \$ _____
Child Member(s) (8-under)		= No Fee
Total Amount Due		= \$ _____

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I/We hereby apply for membership in the San Joaquin Valley Rangers, Inc. a corporation, and agree to pay the dues as prescribed by the Club Bylaws thereof and further agree to be bound and abide by all the policies and procedures of said corporation.

\_\_\_\_\_  
Signature of Senior applicant or Parent/Legal Guardian of Jr.      Signature of Sponsor

What Events are you and your family interested in? (check all that apply)

English  Western  Gymkhana  Parades  Penning  Trail Rides  Roping  Drill  Camping  Cowboy Challenge

Other events you and your family would like the Club to Sponsor: \_\_\_\_\_

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### **SJVR Club Secretary Use Only**

Date paid: _____	Amount Paid: _____
Check #: _____	Cash: _____ Other: _____
Date: _____	Membership approved : <input type="checkbox"/> yes <input type="checkbox"/> no
Add to Roster: _____	Record membership date: _____