# Swedish Club of Denver, Colorado
## *Membership Application Form - 2019-2020*

*All memberships are from January 1st through December 31st. You have the option of a one or two year membership. A two year membership saves you money!*

| ***ONE YEAR MEMBERSHIP RATES*** | | ***TWO YEAR MEMBERSHIP RATES*** | |
|---|---|---|---|
| *Individual* | *$25.00* | *Individual* | *$45.00* |
| *Adult Student (18-25 Yrs. old)* | *$20.00* | *Adult Student (18-25 Yrs. old)* | *$35.00* |
| *Senior Individual (65 & older)* | *$20.00* | *Senior Individual (65 & older)* | *$35.00* |
| *Couple* | *$30.00* | *Couple* | *$55.00* |
| *Senior Couple (65 & older)* | *$25.00* | *Senior Couple (65 & older)* | *$45.00* |
| *Family* | *$35.00* | *Family* | *$60.00* |

**Membership Categories:**

**Individual** (1 person)

**Couple** (2 persons, residing at the same address.)

**Family** (Married couple or single parent with 1 or more children ages 21 and under, living at home or at college. *Persons over the age of 21 pay an individual membership.)*

**Please check one: _____ Renewal _**

**_____ New member - How did you hear about us?_____**

**Information (Please PRINT legibly)**

| Name(s): | Birth date: (Month/Day/Year) | Anniversary: (Month/Day/Year) |
|---|---|---|
| | | |
| | | |
| Street Address (including Apt./Unit #) or P.O. Box: | | |
| City: | State: | Zip: |
| Telephone: ( ) | E-mail: | |
| Children: (21 and under **AND** living at home or going to college) | Birth date: (Month, Day, Year) | |
| | | |
| | | |
| | | |
| **MAY WE PUBLISH YOUR EMAIL ADDRESS IN THE 2018 DIRECTORY?** | **YES** | **NO** |

**I wish to apply for membership for: _____ 1 year (2019 only)**

**_____ 2 years (2019 and 2020)**

**My membership category is: (_____ Individual) (_____ Couple) (_____ Family).**

(For more information on the Swedish Club of Denver, go to www.swedishclubofdenver.org.)

Make check payable to: ***The Swedish Club of Denver***

Please mail this application form and a check with the appropriate membership fee amount to:
Dave Lanham, 10800 Riverdale Rd, Denver, CO 80233

***For Club Use Only:***

*ID#_____ Check#_____ Amount $_____ Date Received_____ Board Approval_____*