



OAKLAND A'S BOOSTER CLUB
2020 Membership Application



We DO NOT share your personal information without your permission. Access to your information is only available to A's Booster Club Board Officers.

PLEASE PRINT:

Name(s) _____

Primary Address _____
(Street Address)

(City, State, Zip Code) (Primary Phone Number)

Membership Type: **NEW** _____ **RENEWAL** _____

Adult Membership (18 & up) is \$26.00 per person – PAY BY CHECK OR CASH AND RECEIVE A \$1.00 DISCOUNT AND PAY ONLY \$25.00 PER PERSON - (Children in the family who are under 18 are included in their Parent-Adult Memberships).

Total Enclosed _____

In order to protect your privacy, any notifications including the Booster Club Newsletters sent electronically will not disclose your email address to other members.

Email Address(s) _____

Are you interested in volunteering for Events? **YES** _____ **NO** _____

How would you like to receive your Newsletter? **Email** _____ **US Mail** _____

WAIVER: I hereby release and discharge the Oakland A's Booster Club, its officers, sponsors, and any other representatives for any injuries or damages of any kind suffered as a result of participating in any event or related activities organized by or through the club. Parent's signature is valid release for any member under the age of 18 years old.

1. Member Signature _____ **Date** _____

2. Member Signature _____ **Date** _____

Please submit completed application with payment (or indicate you have paid via PayPal) at a meeting or mail to:

MEMBERSHIP
C/O Kristina Varela
23875 Wright Drive
Hayward, CA 94541
Email: AsBoosterClub@gmail.com

Make checks payable to: **Oakland A's Booster Club**
PayPal - OaklandAsBoosters@gmail.com

Thank you for your support. Go A's!!!!

Cash	Check	PayPal
Check No.:	_____	
Date Rec'd:	_____	
Amount:	_____	