

FESTIVAL BYTES COMPUTER CLUB
MEMBERSHIP APPLICATION

Please PRINT

Name _____ SCF Res. Pass _____

SCF
Address _____

Home Phone () _____ Cell Phone () _____

Email
Address _____

New Member _____ Renewing Member _____

Dues are \$10 per year per person. (due by end of Dec.) **CHECKS ONLY, PLEASE** made payable to: **SCF FESTIVAL BYTES**

—OFFICE USE ONLY—

DATE REC. _____ CHECK NO. _____

----- Please Cut and discard lower half -----

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