



# CLAN MACLEOD USA, INC. MEMBERSHIP APPLICATION

3923 ROCKWOOD WAY #B  
WEST VALLEY, UT 84120-6880

(Make check payable to: Clan MacLeod Society, USA & mail to the address above)

## MEMBER INFO

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ SEPT (if applicable): \_\_\_\_\_

## SPOUSE INFO

SPOUSE (Maiden Name if applicable): \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ OCCUPATION: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

## CHILDREN

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

## DUES

1 Year Adult	1 Year Youth *up to 18	Lifetime Over 50	Lifetime 30 to 49	Lifetime under 30
\$35	\$10	\$700	\$1000	\$1400

MEMBERSHIP FEE ENCLOSED: