## Tacoma Dragon Boat Association

## **Membership Application 2017**

PLEASE PRINT CLEARLY Name:	Date of Birth:
Full Address:	
Best Phone Number(s):	
Email Address:	
need to view it for purposes of safe Official email communications are of your privacy. We also periodically is the above information that you do	ntact information available of officers and coaches, who have a ty, bookkeeping, coaching, and association communications. distributed by using the "undisclosed recipient" feature to protect saue contact lists to the general membership. <i>Please circle any of not wish to have included in this list.</i>
PLEASE PRINT CLEARLY	, ,
Emergency Contact Phone:	
•	physical limitation the coaching staff should be aware of? This e affected by dehydration, strenuous exercise, or allergies to
What work experience, skill sets, ho	obbies, or other interests are you willing to share with members?
Signing in the space below indicates online):	s my agreement (typing substitutes for my signature if completing
Name:	Date: