



BATON ROUGE IRISH CLUB

MEMBERSHIP/RENEWAL APPLICATION

Please check one and circle type:

Renewal ____ \$25.00 Person/\$40.00 Family Membership

New Member ____ \$40.00 Person/\$55.00 Family Membership

DATE: _____ (Check# _____ Cash _____)

NAME: _____

STREET: _____

CITY: _____ ZIP CODE: _____

HOME PHONE: () _____ CELL: () _____

WORK PHONE: () _____ E-MAIL: _____

EVENT JOINED AT: _____

RECOMMENDED BY: _____

What is the best way to contact you? _____

DATES TO REMEMBER: Month/Day BIRTHDAY: _____

ANNIVERSARY: _____

Make checks payable to:

BATON ROUGE IRISH CLUB

Mail checks to:
BATON ROUGE IRISH CLUB

P.O. Box 64972
Baton Rouge, LA 70896