



Kettle Moraine Curling Club

MEMBERSHIP APPLICATION

Membership type: Regular Social Junior Adult **Introductory**

Applicant #1:

Applicant # 2:

Date of Birth:

Date of Birth:

Email:

Email:

Cell Phone:

Cell Phone:

Spouse's Name (if non-applicant):

Address:

Home Phone:

City:

State:

Wisconsin

Zip:

Children's Names:

Date of Birth:

Register for Juniors?

Junior Adult?

Yes No

Yes No

I/We **would like to** participate in the following events:

Mixed Curling: Friday (6:30pm) Saturday**Open** (5:30pm) Mixed Doubles (Sunday afternoon)

Men's Curling: Monday (6:15pm)

Women's Curling: Tuesday (6:30pm) Thursday (Daytime)

Open Curling: Thursday TATT Thursday Drop-In **Sunday 5 & Under Open Drop-in**
(Daytime) (6:30/8:30pm) (6:30/8:30pm)

Previous Curling Experience:

Last Position Played:

How did you learn of curling and KMCC?

I understand that this application, when properly completed, will be submitted to the Membership Committee and Board of Directors of the Kettle Moraine Curling Club for their acceptance or rejection. If elected to membership, I hereby agree to abide by the terms and conditions of the Bylaws and Rules and Regulations of the Kettle Moraine Curling Club.

Applicant #1 Signature/
Initial: (or legal guardian for
Junior-Only application)

Date:

Applicant #2 Signature/
Initial:

Date:

Please save this form and email to: kmcurlingclub@gmail.com