

P.O.Box SS19304, Nassau, The Bahamas <u>http://www.bahamastriathlon.org</u> <u>secretary@bahamastriathlon.org</u>

Application for Membership 2018

Section	on 1 – Personal Informatio	on			
Last Name		First Name			MI
Emai	l address				
Maili	ng & Residential Address: P.O.	Box	Street		
City/	Town	Islaı	nd & Country		
Date	of Birth (day/month/year)	/	/ Gender	r (M) / (F)	
Telep	ohone: Home	Cell		Work	
Club_		Guardian Name	(if under 18)		
Signa	ature	Guardian	Signature (if under 18)	
Annu	al Subscription:				
Janua	al membership subscriptions ary to 31 st December. Any me ved from the list of members oval.	mber who allows	s his/her annual subscri	iption to lapse fo	or 3 months will be
(1)	Annual Membership; \$25				
(2)	One time event membership	»: \$10			
	Event Name:				
	Event Date:				

I would like to get involved on a BTA Committee as indicated below:

Officiating	Coaching	Newsletter	Membership	Fund Raising	Marketing
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FOR BTA USE ONLY - DO NOT COMPLETE ANY INFORMATION BELOW THIS POINT

Application Received by					
Date					
Comments					
Check NumberBank					
Application: Approved	_ Denied				
Membership Card Issued Yes No					
Information entered in Computer System & Membership Book					

