

WACO[®] Membership Application



TO APPLY FOR MEMBERSHIP, FILL OUT THE FOLLOWING AND BRING IT TO THE NEXT WACO[®] MEETING; OR MAIL IT ALONG WITH A CHECK FOR \$6.00 PAYABLE TO - WACO[®] - PO BOX 94781 SCHAUMBURG IL 60194

NAME _____
ADDRESS _____
CITY, STATE _____ ZIP _____
PHONE (OPTIONAL) _____ AGE (OPTIONAL) _____
TYPE OF COMPUTER YOU OWN (OPTIONAL) _____

THE APPLICANT HEREBY ACKNOWLEDGES MAKING APPLICATION TO THE WOODFIELD AREA COMPUTERIST ORGANIZATION FOR MEMBERSHIP (WACO[®]). APPLICANT ALSO CERTIFIES THAT NO PROMISES OF DISCOUNTS, OR REWARDS HAVE BEEN MADE, THAT ANY AND ALL MEMBERSHIP FEES ARE NON-REFUNDABLE (ACCEPT AS PROVIDED BY CLUB CHARTER), AND THAT APPLICANT SHALL NOT HOLD WACO[®] RESPONSIBLE FOR ANY DAMAGES INCURRED AS A RESULT OF HIS/HER MEMBERSHIP IN WACO[®]. WACO[®] AGREES TO MAKE AVAILABLE TO THE ABOVE MEMBER (AT TIME OF ACCEPTANCE AND PAYMENT OF ALL MEMBERSHIP DUES) ALL BENEFITS APPLICABLE AT TIME OF ACCEPTANCE REGARDLESS OF AGE, RACE, SEX OR ANY OTHER BIAS.

APPLICANT

DATE

DO NOT WRITE BELOW THIS LINE

MONIES REC'D _____ BY _____
(DATE) (INITIALS)

CARD ISSUED _____ MAILED _____
(INITIALS) (DATE)

TEMPORARY MEMBER IDENTIFICATION



_____ IS A MEMBER IN GOOD
STANDING OF THE WOODFIELD AREA COMPUTERIST ORGANIZATION AND
ENTITLED TO ALL THE BENEFITS THEREOF THROUGH _____.

AUTHORIZED CLUB OFFICER

DATE

IMPORTANT NUMBERS - WACO[®] HOTLINE (CLUB NEWS 24 HR/DAY)

VOICE (RECORDING) 843-7852

MODEM (300 BAUD) 351-4374