

HERRIN BOCCE CLUB, INC.
P. O. BOX 2091
HERRIN, IL 62948

Membership Application: June 1, 2023 to May 31, 2024

Individual Membership: \$25.00

Keyfob Option: \$10.00

NAME: _____

Include Keyfob for restroom (Yes or No) _____

Amount Enclosed for Individual Membership: _____

Family Membership: \$40.00

Keyfob Option: \$10.00 for each keyfob

NAMES: _____ (primary member)

Include Keyfob(s) for restroom (Yes or No) _____

Number of Keyfobs to purchase @ \$10.00 each: _____

Amount enclosed for Family Membership: _____

MAILING ADDRESS: _____

EMAIL: _____

CELL PHONE NUMBER(S): _____

Make check payable to: Herrin Bocce Club

Mail check to: P.O. Box 2091, Herrin, IL 62948