



*Blue Crab Fun Bunch
Membership Application
Please Print*

I/we, _____, ask that my/our application for membership in the Blue Crab Fun Bunch be considered for approval. I understand the dues are \$10 per person, per year. Below is the completed application. I understand that the information provided will be used for administrative purposes of the organization and to create a roster to be distributed to my fellow camping club members only.

My information

Name: _____ Birthday (month/day only) _____

Address: _____, _____ State: _____

Zip: _____ Phone (home): _____ Cell: _____

Email: _____

Good Sam Membership No.: _____ Expires: _____

Spouse/Significant other information

Name: _____ Birthday (month/day only) _____

Email: _____ Cell _____

Additional family members who camp with us

Name: _____ Birthday (month/day only) _____

Name: _____ Birthday (month/day only) _____

Name: _____ Birthday (month/day only) _____

Camper Type Information

Type: A, B, C, 5th wheel, Travel Trailer, Pop Up, other _____. **Length:** _____ **Amps:** 20, 30, 50 **No. of Slides:** _____
(Circle One) (Circle One)

Signature: _____ Date: _____

