Treasure Coast Rare Fruit Club Membership Application

Make checks payable to **Treasure Coast Rare Fruit Club** or TCRFC

$20.00 single / $25 family

Please **PRINT CLEARLY** your name as you wish it to appear on your name tag.
Annual membership will start January 1 and end December 31 of each year.

Date: ___/___/___ _____ **New Member** _____ **Renewal**

Name: _____ **Occupation:** _____

Address: _____ **Phone (home):** (___) _____

(cell): (___) _____

City: _____ **State:** _____ **Zip:** _____-_____

E-mail: _____
Please write very clearly

Emergency Contact Name: _____ **Relationship:** _____ **Phone:** (___) _____

Additional Household Members:

Name:	**Relationship:**	**E-mail:**	**Phone:**

Dues: Annual Membership (January – December)
$20 individual, $25 family. Renewals in January.
New members: sign up Oct.-Dec, next year is included.
Make checks payable to **Treasure Coast Rare Fruit Club or TCRFC**.
Sign up at a meeting or mail this form to:

TCRFC
535 35th Ave SW
Vero Beach, FL 32968

FOR TREASURER'S USE ONLY:
Date Paid: _____ Cash Amt: _____

Check Amt: _____ Ck#: _____