## Canfield Athletic Boosters Inc. Invitation-Application for Membership

Please Print:Mr.	MrsMiss _	Ms. Date:		
First Name	MI	Last Name	Nickname	
Spouse's Name		Children (Names and Ages)		
Home Address		City	Zip Code	
Home phone #	Cell #	Email		
Occupation	Business Add	Business Address		
Hobbies, Interests				
I am a member of anot If yes, which or	her service organizatione(s)?			
express a preference				
		ram - (May-September, February)-	sell ads, sell program	
	(September, October)			
		lanuary) - sell \$50 tickets		
		d scholarship applications		
Website / Publ	icity			
Membership				
am available to attend Usually held the		tings nonth from 7:00pm - 8:00pm	yesno	
Name of Booster Memb	per to sponsor this can	didate		
Signature of Sponsoring	Booster Member	Dat	te	

Revised 2022