



Membership Form

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

EMAIL: _____ TELEPHONE: _____

TEMPLE/COURT NAME & NO.: _____

POLO SHIRT SIZE: S _____ M _____ L _____ XL _____ 2X _____ 3X _____

NAME PREFERRED ON SHIRT: _____

METHOD OF PAYMENT: CASH _____ CHECK/ MONEY ORDER _____ AMOUNT \$ _____

PAYPAL _____ CThomasBooster@yahoo.com

CASHAPP _____ \$TeamThomasBooster

MEMBERSHIP FEE- \$75.00 **Minimum Installment Payment \$25.00**

Make all checks or money orders payable to: Corey Thomas Booster Club and mail the form and payment to:

**Dt. Tracy Parks
6355 Covina Court
Montgomery, AL 36117**

The form may also be scanned and emailed to: CThomasBooster@yahoo.com

DO NOT WRITE BELOW THIS LINE

Date Received: _____ Amount: \$ _____ Receipt No.: _____ Received by: _____