



# St. Louis Whirlybirds

## 2010 Membership Application

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Numbers:

Home: \_\_\_\_\_

Cell: \_\_\_\_\_

Email address: \_\_\_\_\_

AMA Number: \_\_\_\_\_

Whirlybirds Card issued: Yes/No

First time membership: \$40.00

Membership: \$60.00

Junior Membership 16 years or younger: \_\_\_\_\_

Paid date: \_\_\_\_\_ Check#/Cash: \_\_\_\_\_