



SOUTH CENTRAL TEXAS ESCAPEES ALAMO AREA CHAPTER 11

MEMBERSHIP APPLICATION FORM:

Date: _____ - _____ - _____
MONTH DAY YEAR

Escapee Number: _____
(assigned to you by Escapees National Office)

Last Name: _____

First Name(s): _____ & _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (_____) _____ - _____ Cell Phone: (_____) _____ - _____

Email: _____ (Chapter will send newsletter email if possible)

***Membership dues \$ 5.00 per year, Please make checks payable to:
ALAMO AREA ESCAPEES CHAPTER 11***

Send this form and your payment to our Wagon Master, who will add your name to the Chapter Membership Roster; then forward your check and form to the Treasurer and newsletter coordinator.

MAIL TO:

**Dan Thompson
334 Oak Ridge
Ingram, TX 78025**

OR Bring this Form and Your Check to the Rally and give to the Chapter Treasurer.

Escapees Chapter 11 Administrative Use Only:

Check accompanied Form _____

Member added to Chapter Roster _____

Treasurer deposited check _____

Member added to Newsletter distribution _____