



Membership Application - Please print clearly

Memberships include the Cribbage World magazine

New ___ Renewal: ___ ACC ID(s): _____

Name: _____

Joint member: _____
(Only if application is for joint membership)

Address line 1: _____
(Use only for Personal Mail box #, in-care-of information, etc.)

Address line 2: _____
(Complete **mailing address** include apt/lot #, etc.)

City _____ ST ___ Zip: _____

Country _____ GR Club No: _____

Optional: Phone No: _____

Optional: Email: _____

Signature/date: _____

Individual ___ # years (3 Max) x 20.00 _____

Joint ___ # years (3 Max) x 25.00 _____

Life Member * 300.00 _____

Joint Life Membership* 375.00 _____

ACC Rulebook (number _____) x 2.00 _____

Youth Program Donation _____

Total Amount Remitted - USD _____

Make checks payable to ACC and send to:

ACC Membership Secretary
PO Box 2444
Roseburg, OR 97470-0510

* Must be 65 or over and a photocopy of proof of birthday (driver's license, etc.) must accompany applications for Life Memberships.

Note: If phone number and email address are provided, member's signature authorizes use of this information for official purposes only. **Your name and city/St may occasionally appear in the CW and/or on the ACC web site.**

ACC form 21-001 03/2017



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