



WAHOO CLUB APPLICATION FOR MEMBERSHIP

Dues Structure

\$10.00 (Youth, 14 & Under)	X _____ = \$ _____	Date Paid _____
\$20.00 (Single Member)	X _____ = \$ _____	Check # _____
\$30.00 (Married Couple)	X _____ = \$ _____	Amount _____
\$40.00 (Family)	X _____ = \$ _____	

___ Renewal ___ New Member ___ Status Change Year: _____

P.O. Box 221142
Cleveland, Ohio 44122
Hotline: 1-216-999-1781
www.wahooclub.com

First Name _____	Last Name _____	Y ___ S ___ M ___ F ___
First Name _____	Last Name _____	Y ___ S ___ M ___ F ___
First Name _____	Last Name _____	Y ___ S ___ M ___ F ___
First Name _____	Last Name _____	Y ___ S ___ M ___ F ___
First Name _____	Last Name _____	Y ___ S ___ M ___ F ___

Address _____
City _____ Phone(day) _____ Phone(other) _____
E-Mail _____ Fax _____

SEND APPLICATION AND CHECK PAYABLE TO: THE WAHOO CLUB
C/O MEMBERSHIP
P.O. BOX 221142
CLEVELAND, OHIO 44122