

Application for Membership in the OVERMOUNTAIN SAMS CHAPTER of the INTERNATIONAL GOOD SAM CLUB

Please print:

Names:			
	Good Sam's First Name	Samantha's First Name	Last Name
	Good Sam Club No.	Exp. Date	
Address:			
	Street		
	City	State	Zip Code

Contact Info:			
	Home Phone	Sam's Cell #	Samantha's Cell #
	e-mail address		
In Case of Emerg: (ICE)			
	Contact	Relationship	Phone Number

Children:			
	1. Name & Age	2. Name & Age	3. Name & Age

Pets:			
	# Dogs	# Cats	# Other

Rig:			
	Trailer: Length / # Slides	5 Wheel: Length / # Slides	Class C MH: Length / # Slides
	Class A MH: Length / # Slides	Conversion Van: Length	Other (50 Amp, etc.)

Signature: _____ **Date:** _____

Sponsor: _____

Please print

Please enclose check made out to Overmountain Sams.

Please contact Carol Bruce (poohatjc@comcast.net) for mailing instructions.

Initiation Fee:	\$ 10.00
Membership Fee (dues)*:	_____
Total enclosed:	\$ _____

* Dues for one calendar year (Jan. 1 - Dec. 31) = \$10.00

*Members joining after June 30 pay \$5.00 for remainder of calendar year.