

GEAUGA BOWMEN
PO Box 193, Chesterland, OH 44026

2009 MEMBERSHIP RENEWAL FORM

(Not to be used for "New Membership" – Please use Membership Application)

Single **(\$50)**
 Family **(\$75)**

Senior Single Age 65+ **(\$35)**
 Senior Family Age 65+ **(\$35)**

Name: _____ Phone: _____

Address: _____ E-Mail: _____

Other Family Members/Ages:

I want to receive the **Newsletter** via E-Mail.
 I want the **Newsletter** mailed to me.

Comments: _____
