

**CALIFORNIA CLUB OF LAGUNA WOODS VILLAGE
NEW & RENEWAL MEMBERSHIP APPLICATION for 2019-2020**



NAME: _____ Phone _____

(Please Print) Last First

STREET ADDRESS: _____

EMAIL ADDRESS: _____ OK to send notices by email? _____

SECOND APPLICANT NAME _____ Phone _____

SECOND APPLICANT ADDRESS – (if different) _____

EMAIL ADDRESS _____ OK to send notices by email? _____

I (we) hereby certify that I (we) reside in Laguna Woods Village. I agree and understand in applying for membership in the California Club of Laguna Woods Village, a social group conducted solely for the pleasure of its members, that each member undertakes the responsibility for his/her personal conduct and that no member, director, officer or the Club is responsible for any accident, loss or theft to any member or guest in the course of any meeting or event sponsored by the California Club. I(we) understand that the California Club takes photos at all events and posts many of them on its website.

Please complete this membership form and send it with your check for \$20.00 PER PERSON made payable to "California Club." Membership runs from July 1st through June 30th of the following year.

**MAIL TO: California Club
V.P. Membership
P.O. Box 2343
Laguna Hills, CA 92654-9998**

APPLICANT'S SIGNATURE _____ Date _____

APPLICANT'S SIGNATURE _____ Date _____
