

https://www.chsyc.com/

## **SYC MEMBERSHIP INFORMATION FORM**

(PLEASE PRINT; for verification of current member or processing of new member information)

SPOUSE #1	SPOUSE #2
NAME: (Last, First):	NAME: (Last, First):
ADDRESS (Street/City/Zip):	<u> </u>
HOME PHONE:	E-MAIL:
CELL PHONE:	CELL PHONE:
OCCUPATION:	OCCUPATION:
EMERGENCY CONTACT NAME:	EMERGENCY CONTACT PHONE NUMBER:
AMES & AGES of children living at home (under a	age 25):
1.	4.
2.	5.
3.	6.
IEMBER Annual Dues -	MEMBERSHIP Initial Joining Fee –
lue annually regardless of Joining Fee status)	N/A – Returning Member (owes nothing)
Family Dues <b>IN FULL</b> - \$450	PAYMENT IN FULL – \$375 with initial dues
☐ Single/Individual Dues IN FULL - \$350	ONE-YEAR PLAN – \$175 with initial dues +
— onigio/marriada. Base in 1 011 year	\$100 by 6/1 + \$100 by 7/1 of first year
*\$25 discount if paid before <b>APRIL 1</b> *	THREE-YEAR PLAN – \$175 with initial dues +
	\$125 with 2 <sup>nd</sup> year annual dues +
	\$125 with 3rd year annual dues
	MILITARY PLAN – \$100 with initial dues +
	\$100 per year until membership fee is satisfied
	(at least 1 spouse active USA or Allied Armed Fo
	*check ☑ plan you are selecting*
	must accompany this form
<b>ANNUAL DUES:</b> Family = \$450; Single = \$350 *\$25 discount if paid in	full by 04/04*
INITIAL MEMBERSHIP FEE: \$375 or appropria	
GRANDPARENT/GRANDCHILD/BABYSIT first and \$50 for each additional; BS = \$80	TTER RIDER FEE: GP/GC = \$100 for \$
TOTAL: ☐ Cash ☐ Check ☐ Card (4%	customer service fee on card transactions) \$
PAY E	BY CREDIT CARD
	* 4% customer service fee added to total*
I VISA or □ MasterCard	4% customer service ree added to total
】 VISA or □ MasterCard lame as it appears on card:	