

2024 Membership Application

| First Name: | Last Name: |
|----------------------------|---|
| Phone: | Can you receive PTDFW text messages (Y/N): |
| Email: | Can we send you emails (Y/N): |
| Street Address: | |
| City: | State: Zip: |
| Birthday (mm/dd): | Do you want to be listed in the PTDFW roster (Y/N): |
| Permission to use your pho | to when taken at group events (Y/N): |
| How did you learn about Pr | rime Timers: |
| | |

ANNUAL DUES

\$35 per man for a 12-month cycle. \$37 per man if paid online. ٠

My signature indicates that:

- I wish to join PTDFW. As a member, I agree to keep the membership roster PRIVATE and ٠ CONFIDENTIAL. 1 am at least 21 years of age.
- I further understand that my membership application is pending final approval of the Board of • Directors, whether as a renewal or first-time applicant.

Signature: _____ Date (mm/dd/yy): _____

Payment Options: 1.) Payment can be made online through our website. 2.) If you prefer, complete this application, and bring it along with payment to a PTDFW event. 3.) Mail this application along with your check (please do not mail cash) payable to:

PrimeTimers® Dallas-Fort Worth

P. O. Box 191101

Dallas, TX 75219-8101