

2007/2008 Kennewick High School Athletic Booster Club

PO Box 5882
 Kennewick, WA 99336
 kennewickboosterclub@hotmail.com

Membership Application

Name: _____ Phone: _____

Address: _____ Work Phone: _____

City: _____ State: _____ E-mail: _____
 Zip: _____

Student(s):
 Name: _____ Grade: _____ Sport(s): _____

I will help with:	Yes/No	Membership Dues: Family \$10.00, Individual \$5.00
Concessions		I agree to abide by the Constitution and Bylaws of
Clothing sales		The Kennewick High School Athletic Booster Club.
Memberships		
Program Sales		Signature
Other		Date: _____ Cash: _____ Check: _____

I prefer the monthly Booster Club meeting minutes be sent to me via email in lieu of regular mail: _____