

## **Application for Membership**

Full name:				
Single or married:	Spouse's name			
Home address:				
Home phone:	email:			
Occupation:	Spouse's			
Employer:	Spouse's	<del>_</del>	<del> </del>	
Business address:	Spouse's			
Business phone:	Spouse's			
Names of children and birthdo	ates:			
Names of Members You Know	:			
List Other Present and Past Clu	b Memberships:			
Are you the son or daughter o	f a current Wedgewood	Club member?	Y / N	
If so, member's name_				
All members are expect during their tenure as a club mwilling to work?	ted to take a turn volunt nember. On which of the			
House and Grounds Ten	nis Pool Soci	al Members	ship	
Signature of Applicant:		Date	//	

Please send application and check for \$150.00 payable to "The Wedgewood Club"

Please Mail to: The Wedgewood Club

P.O. Box 110 Bedford, MA 01730 c/o Membership

- Wait list order is established by the post mark date on the applicant's envelope
- Applicants are responsible for keeping contact information up to date with the membership chair at: <a href="mailto:membership@thewedgewoodclub.org">membership@thewedgewoodclub.org</a>