

**NEWCOMERS OF CENTRAL FLORIDA
MEMBERSHIP FORM
2009-2010**

Newcomers of Central Florida is a 12-month club, with each new year beginning on June 1 and ending on May 31. Dues are payable from June 1 to July 31 for renewals. There will be a \$5.00 reinstatement fee if not paid by July 31. New members are accepted all year. Dues for the current year are \$25.00 per year or \$12.50 for those joining January-May. Please mail this signed, completed form with your check payable to:

**Newcomers of Central Florida
11524 Swift Water Circle
Orlando, Florida 32817**

MEMBER INFORMATION FORM

First Name: _____ Last Name: _____ Husband: _____

Street Address: _____

City: _____ Zip Code: _____ Subdivision: _____

Telephone: (____) _____ Cell #(____) _____

Email address: _____

Date of Birth: Month _____ Day _____ Originally From: _____

Club Positions previously held: _____

Activities interested in: _____

Please send my newsletter either by _____ email or _____ snail mail (please check one)

I am interested in helping in:

Ways & Means
 Outreach
 Historian
 Publicity

Helping Hands
 Programs
 Luncheons
 Hospitality

Fashion Show
 Reservations
 Newsletter
 Special Events

NEWCOMERS OF CENTRAL FLORIDA INSURANCE RELEASE

I hereby release Newcomers of Central Florida, as well as all past, present and future directors and all persons in privities with the organization and directors individually or in any combination, from any and all claims of every kind and character, or are hereafter to arise, directly or indirectly, resulting from meetings or activities associated with the organization and damages resulting there from by whomsoever suffered. Further, I do covenant to and with the parties in whose favor this release is executed that I am authorized to execute this release. And I do hereby indemnify the party in whose favor this release is executed and will save and hold each harmless from any claim on the part of anyone whomsoever. I certify that I have read the above and the foregoing release and hereby agree to its contents.

Member
Signature: _____ Date: _____

Paid By: Check # _____ Cash _____ New Member _____ Renewal _____

Membership Chairperson: Date Received _____ Amount Paid _____ Signature _____

How did you hear of Newcomers Club? _____