

## Pub 76 INC. P.O. Box 76, Stoneboro, PA 16153

Guest of:	Membership #				
New Membership Application	Ren	ewal	_ (check one)		
First Name:	Last Nam	ne:			
Email Address:		Phone:			
Birthdate: / Address: _					
City:	_State:	_ Zip Code:			
Must be 18 years or older to apply for membership. Include your \$25 annual membership fee with application payable by cash or check, make checks payable to: Pub 76 INC. Write 2023-2024 membership dues in comment line and mail to: Pub 76 P.O. Box 76, Stoneboro PA 16153					
Signature:		Date: / _	/		

By signing this you acknowledge and read the House Rules of Pub 76. Infraction o	)f
the rules could result in suspension or termination of membership. Membership	
fee will not be refunded.	

Pub Board Official Use		Meeting Date	_//
President	Date	Secretary	Date
Vice President	Date	Treasurer	Date
Board Member	Date	Board Member	Date
	Board Member	 	

By signing you're accepting the applicant's membership to Pub 76 INC.