## **CAPE FEAR MEN'S CLUB, Inc.**

Email: CFMCMembership@gmail.com Membership Application

## Please write CLEARLY

Name:	First	Nickname	_		Last Name			
Spouse/Significant Other:					Ve	teran ?	Y	N
Street Address:								
City, State:								
Zipcode:					_			
Subdivision:					_			
County:					_			
eMail Address: PLEASE	WRITE CLEARLY							
Home Phone:		Cell P	hone:					
CFMC Sponsor(s):								
INTEREST AREAS: (Inser	t an X where applicable,	, can always b	e updated later)	)				
Biking [ ]	Cultural Events	[ ]	Golf	[ ]	Pickleball	[ ]		
Biking - Easy Riders [ ]	<b>Current Events</b>	[ ]	<b>Headline News</b>	[ ]	Poker	[ ]		
Book Group [ ]	Financial Investing	[ ]	Hiking	[ ]	Shooting	[ ]		
Bowling [ ]	FISHING: Fresh Water	[ ]	History	[ ]	Tech Talk	[ ]		
Bridge [ ]	Salt Water	[ ]	Kayaking	[ ]	Tennis	[ ]		
Cigars [ ]	Surf	[ ]	Live Music	[ ]	Texas Hold'em	[ ]		
Couples Bridge [ ]	Fly	[ ]	Photography	[ ]	Wine Tasting	[ ]		
Cribbage [ ]			Pickleball	[ ]				
EATING: Beer, Burgers 8	Buddies [ ] Breakfa	st Bunch [ ]	Lunch Bunch [	]	Early Risers Breakfast	1		
Other Interests:								
Note: Other Club activities so General Membership meeting	=	=				members	•	
Signature:					Date:			
*** APPLICATION MUST I	NCLUDE SIGNED HOLD I	HARMLESS AN	ID MEMBER RES	PONSIB	ILITY FORMS TO BE O	ONSIDE	RED *	***
Attachments: Hold Harmless Agreement					Re	v. 12/19/2	023	

Member Responsibilities