

DEVILS FAN CLUB, INC.

APPLICATION FOR MEMBERSHIP

Only one (1) name per application unless a FAMILY membership
MEMBERSHIP EXPIRES JUNE 30, 2018

2017 - 2018

DUES: Adult \$20.00 _____; Junior \$15.00 _____; Family \$50.00 _____ (2 adults maximum)

NAME: _____ **Date of Birth:** ____/____/____
LAST FIRST M.I. MM DD YYYY

ADDRESS: _____ **APT:** _____ / **FL:** _____

CITY: _____ **STATE / PROV:** _____ **ZIP:** _____ + _____

COUNTRY: _____ **HOME PHONE:** (____) _____

E-MAIL ADDRESS FOR NEWSLETTER AND OTHER COMMUNICATIONS: _____

MEMBER'S SIGNATURE: _____ **DFC #** _____

PARENT'S SIGNATURE: _____

REQUIRED IF ANY APPLICANT IS UNDER THE AGE OF 18

If there is another DFC member at the same address and you **DO NOT** want to receive a newsletter, **check here**

If this is a FAMILY Membership, please list names, birth dates and signatures of all other Family members being enrolled:

NAME: _____ SIGNATURE: _____
BIRTH DATE: ____/____/____

NAME: _____ SIGNATURE: _____
BIRTH DATE: ____/____/____

NAME: _____ SIGNATURE: _____
BIRTH DATE: ____/____/____

IF YOU NEED TO ADD MORE FAMILY MEMBERS, PLEASE MAKE PHOTOCOPY OF THIS FORM

1. Were you a Devils Fan Club member during the 2015-2016 or 2016-2017 seasons? YES NO
2. Would you like a copy of the Devils Fan Club Constitution & Bylaws? YES NO

Please add \$5.00 (postage & handling) to your dues for each copy to be mailed.

3. If you are interested in working on a DFC Committee, please check the appropriate box(s):
 Special Events Trips Charities Hospitality Game Night Table Web Site
 Newsletter Financial Review Amateur Hockey Bylaws NHLBC Convention
4. Are you a SEASON TICKET HOLDER? YES NO

RETURN THIS APPLICATION, WITH THE APPROPRIATE DUES TO:

DEVILS FAN CLUB, INC.

ATTENTION: MEMBERSHIP SECRETARY

25 LAFAYETTE STREET, NEWARK, NJ 07102-3611

MAKE CHECKS / MONEY ORDERS PAYABLE TO: DEVILS FAN CLUB, INC.

U.S. FUNDS ONLY DO NOT MAIL CASH

Web site: www.devilsfanclub.org Facebook: [facebook@devilsfanclub.org](https://www.facebook.com/devilsfanclub.org)

FOR FAN CLUB USE ONLY

ENTRY DATE	AMT. RECEIVED	CASH	CHECK #	MONEY ORDER #	MEMBERSHIP #	NEWSLETTER
						Volume No.: 36 issue #: