Oak Hollow Sailing Club High Point, NC MEMBERSHIP FORM 2017

Please print this	form out, co	mplete it and mail it	t with your payment to	the address
below		-		
Name:				
Address:				
City:			State:	Zip:
Best phone number	ber to reach	you:		
Secondary phone	e number in	case of an emergenc	ey:	
Family Members	s in your hou	sehold:		
1.	•			
2.				
3.				
4.				
5.				
If applicable:				
		Length:	Sail #:	
		\$60.00 Annual		
	\$1	5.00 Annual Studen	nt Membership	
	\$20.0	00/Person Training I	Fee if Applicable	
	Ple	ease make check pay	able to:	
	OAK	CHOLLOW SAILIN	NG CLUB	
		And mail to:		
	Treas	urer, Oak Hollow Sa	ailing Club	
		c/o Linda Marsl	h	
		4904 Carolwood D	Prive	
		Greensboro, NC 27	7407	
Se	ee us on Fa	cebook: Oak Hol	low Sailing Club	

Visit our web site: ohsc.us