



ASSISTANCE LEAGUE® TULSA MEMBER INFORMATION AND DUES REMITTANCE

MEMBER INFORMATION (Please indicate changes or corrections)

Name, Street Address, City, State, Zip, Date of Birth, Email Address, Home Phone, Cell Phone, Spouse/Partner

EMERGENCY CONTACT INFORMATION:

Name, Relationship, Phone

MEMBERSHIP CLASSIFICATION AND DUES

Please mark the appropriate membership classification box and enclose a check for your dues and optional Circle Fund donation. Dues are due and payable (date) and are delinquent (date).

- Membership Classification: Voting (Classification) \$, Nonvoting (Classification) \$

Submit this form and your check to the Vice President Membership via mail at 5350 East 31st Street, Tulsa, OK 74135 or by placing it in the membership mailbox at the building.

INSURANCE:

I understand that there are inherent risks involved while participating in any Assistance League activity or event, I hereby accept and assume all these risks, and all other risks, associated with my decision to participate in any Assistance League activity or event. I hereby freely and voluntarily accept for myself alone all risks of injury, illness or death. I agree that I shall maintain a valid drivers' license and proof of personal automobile insurance for using my own vehicle for Assistance League of Tulsa business.

Signature, Date, Printed Name

For Official Use Only

Ck#, Amt., Date, By