



Today's Date \_\_\_\_\_

## Berkeley Racing Canoe Center Membership

**Current Information: (Members are responsible to update the information when there are any changes.)**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ St: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Best: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_ Tel # \_\_\_\_\_

Email Address: \_\_\_\_\_

*Please use a personal, not work, email address.*

\_\_\_ Please add the above email address to our DragonMax email group.

### I am interested in helping the club in the following areas:

\_\_\_ Recruiting \_\_\_ Website \_\_\_ Fundraising \_\_\_ Public Relations \_\_\_ Equipment Maintenance  
\_\_\_ Social Activities

**New Members** - I heard about BRCC/DragonMax from \_\_\_\_\_

<b>Dues</b>	<b>Amount</b>
\$100 Adult membership full year (January 1 - December 31)	_____
\$ 50 Adult membership (new members joining after June 30)	_____
\$ 20 Annual membership for college students or paddlers 25 and under	_____
\$ 0 Annual youth membership (18 and under)	_____
___ Tax-deductible donation to BRCC	_____

**Total amount of payment**

Please send to The Berkeley Racing Canoe Center  
1442a Walnut St. #243 • Berkeley CA 94709

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Date Received _____	Check Amt _____	Check Number _____
Membership Type _____	Membership Amount _____	Membership Month _____
Donation Amount _____	Date Check Deposited _____	