
Silver Strikers Club Membership Application



New Member: _____ Membership Renewal: _____

Name: _____

Spouse name (if also applying for membership): _____

Address: _____

City: _____ State/Country: _____

Zip/Postal Code: _____ Phone (optional): (_____) _____ - _____

Email: _____

(Email address is required for members residing outside of the U.S.)

For a Renewal, your Silver Strikers Club Number: _____

May we publish the above information in the Club Roster? Yes No

Indicate your preference for receiving the Club newsletter:

Email (Free) No newsletter

I have enclosed payment as follows:

Annual membership (\$15) _____

Spouse membership (\$15) _____

Get a printed Club Roster (\$10) _____

Total enclosed \$ _____

Complete and mail with payment to: Silver Strikers Club

c/o Membership Officer

P.O. Box 984

Powell, Ohio 43065-0984

You may also submit form via email to: membership@silverstrikers.com

This application is also available on the Club website, with a link to PayPal to pay dues.

Check out our website at: www.silverstrikers.com