

THE PLAYERS 2019 MEMBERSHIP APPLICATION

January 1 – December 31 (Cutoff for 2019 Membership is 10/31/2019)
\$10.00 Per Person

PLAYERS CLUB USE ONLY

Check # _____ Amt _____ Init. _____

Cash _____ Amt _____ Init. _____

Name: _____

Birth date: _____

Name: _____

Birth date: _____

Telephone #: _____ Mobile Phone #: _____

Home Address: _____

Emergency Notification Name: _____

Emergency Telephone #: _____ Relationship: _____

Interested in volunteering? Please indicate choice(s): Bingo _____ Escort _____

RESPONSIBILITY

I/We understand and agree as a member or guest of The Players Club, a social, travel group conducted solely for the pleasure of its members and guests, undertakes the responsibility for his/her personal conduct; that no member, director or officer is responsible for any accident, loss or theft due to any member or guest in the course of any meeting or any event sponsored by The Players Club. I further agree to abide by all rules and regulations governing The Players Club.

Signature: _____

Date: _____

Signature: _____

Date: _____

PLEASE MAKE YOUR CHECK PAYABLE TO THE PLAYERS AND MAIL TO:
CAROL COLEMAN, 356 AVENIDA CASTILLA, UNIT D, LAGUNA WOODS, CA 92637 – 949-412-4404
IF MAILING APPLICATION, PLEASE INCLUDE A STAMPED, SELF-ADDRESSED ENVELOPE.

• CASINO TRIPS

- Provide your full birth date to receive casino incentives.
- Provide casino card number(s) below
- Proper Government I.D. is a must! LAGUNA WOODS VILLAGE I.D. IS NOT ACCEPTABLE.

LIST PLASTIC CARD NUMBER ISSUED TO YOU BY THE FOLLOWING CASINOS:

NAME(S):	CARD NO.	CARD NO.
PAUMA		
VIEJAS		

THANK YOU! FOR JOINING THE PLAYERS CLUB!