

# KERN COUNTY BASQUE CLUB MEMBERSHIP APPLICATION

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

**Basque Town** (family is from): \_\_\_\_\_ **Basque Province** (family is from): \_\_\_\_\_

**Basque Town** (family is from): \_\_\_\_\_ **Basque Province** (family is from): \_\_\_\_\_

Spouse's Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

**Basque Town** (family is from): \_\_\_\_\_ **Basque Province** (family is from): \_\_\_\_\_

**Basque Town** (family is from): \_\_\_\_\_ **Basque Province** (family is from): \_\_\_\_\_

\_\_\_\_\_ **Please check here if your information is the SAME as last year. If it is NOT the same, please fill out your address, phone number and e-mail below.**

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: ( ) \_\_\_\_\_ E-Mail for Newsletter \_\_\_\_\_

Renewal Memberships

\_\_\_\_\_ Single \$75.00

\_\_\_\_\_ Couple \$125.00

New Memberships

\_\_\_\_\_ Single \$100.00

\_\_\_\_\_ Couple \$175.00

There will be a **late fee of \$25** for all Membership dues **not received by June 1<sup>st</sup>**.

If you would like to pay for your membership by **credit card**, fill out the card information below for the transaction to be completed; there will be a 5% convenience fee added to the total owed.

**Type of card:** \_\_\_\_\_ **Credit Card Number:** \_\_\_\_\_

**Expiration Date:** \_\_/\_\_/\_\_\_\_ **CRV Number:** \_\_\_\_\_

**Please mail back your form to**

**KCBC  
P.O. Box 416  
Bakersfield, CA 93302**