

BOSTON COLLEGE CLUB OF CAPE COD

2024 MEMBERSHIP APPLICATION

NEW MEMBER RENEWAL ADDRESS CORRECTION

NAME _____ SCHOOL _____ YEAR _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ EMAIL _____

SPOUSE _____ SCHOOL _____ YEAR _____

2024 Dues of \$25.00 \$25.00

BC Scholarship Fund for Cape Cod student (Optional) _____

Total _____

Please make check payable to **B.C. CLUB OF CAPE COD.**

Mail to: BC Club of Cape Cod
PO BOX 1548
South Dennis, MA 02660