

# Little Rock Bop Club Membership Application

New Member -\$25       Renewal/Returning Member -\$25

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone No. \_\_\_\_\_ Birth Month & Day \_\_\_\_\_

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

Signature \_\_\_\_\_ Date \_\_\_\_\_

*The above signed hereby releases the Little Rock Bop Club and its officers, directors and members from any and all liability arising from my presence or participation at the Little Rock Bop Club dances and events held at The Ballroom on Shackelford.*

**RECEIVED BY:** \_\_\_\_\_

Send your completed application with your check for \$25 made payable to:  
Little Rock Bop Club/1300 N. Shackelford, Little Rock, AR 72211



**PLEASE PRINT LEGIBLY!!**  
AND fill out all blanks!  
Do NOT write 'SAME'

**Your email address is required to receive club information.**

Bi-monthly newsletter is sent electronically.



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