



South Bay Raiders Booster Club San Diego, CA Est. 2004



MEMBERSHIP APPLICATION
www.southbayraidersclubsd.com

\$35.00 per person for 1 year
\$100.00 Family of 4 for 1 year,
\$20 each additional family member for 1 year

Name: _____ Date: _____

Address: _____ Apt#: _____

City: _____ Zip Code: _____

Home Phone # () _____ Interview By: _____

Mobile# () _____

E-Mail Address: _____

Birthday: _____

Member #: _____ Ex. Date: _____

T-Shirt Size: _____

Type of Vehicle: _____ Year: _____ Lic. Plate #: _____

Type of Work: _____ Phone#: () _____

I agree to follow all the rules & regulations and pay and renew my membership every year.

I _____ from this date forward with God as my witness do pledge, My Commitment, My Honor, My Team, and My Brotherhood to The South Bay Raiders Booster Club.

Member Release

I _____ as a member of the South Bay Raiders Booster Club understand that I am responsible for my conduct at all or any South Bay Raiders Booster Club sponsored events, and I do hereby release, absolve, indemnify and hold harmless South Bay Raiders Booster Club and any organizers, sponsors, board members, land owners and participants and any other person(s) or entity duly acting on the behalf of South Bay Raiders Booster Club, from any claims arising out of injury(s), of any nature, to any member(s) and their family while participating in any South Bay Raiders Booster Club activities.

MEMBER SIGNATURE

President

Vice President

Treasurer