

Mail to: San Diego Metro Pigeon Club  
P.O. Box 152572  
San Diego, CA 92195-2572

# San Diego Metro Pigeon Club

## Membership Form

Name

Birthday

_____	_____
_____	_____
_____	_____
_____	_____

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number(s): \_\_\_\_\_

Breeds currently raising:

\_\_\_\_\_

\_\_\_\_\_

Other Breeds of Interest:

\_\_\_\_\_

\_\_\_\_\_

(Circle One)

Dues:                      Seniors - \$10.00                      Juniors - \$5.00                      Family - \$15.00

\_\_\_\_\_

*(FOR OFFICIAL USE ONLY)*

Membership Form Complete:                      Membership Type                      Senior                       Junior                       Family

Membership Number(s) \_\_\_\_\_                      Payment Type : Cash                       Credit

Membership Chairman Signature \_\_\_\_\_                      Date \_\_\_\_\_