

**CONNECTIONS NEW MEMBER/INFORMATION FORM
A SUN CITY WEST WOMEN'S FRIENDSHIP CLUB**

**PLEASE COMPLETE THIS FORM AND MAIL WITH
YOUR CHECK FOR \$20.00 TO:
Connections, P. O. Box 5314, Sun City West, AZ 85376**

Name: _____

Address: _____

Rec # _____ **(Optional)**

Date: ___/___/___ **Phone: Home** _____ **Cell** _____

Husband/significant other's name _____ **Home State:** _____

Residence: Full Time _____ **Winter Only** _____

E-mail Address: _____

Please indicate the activities that are of interest to you. Details about each group can be found on our website: scwconnections.com

Social Bridge _____ **Mexican Train** _____ **Mahjongg** _____ **Golf** _____

Duplicate Bridge _____ **Hand & Foot** _____ **Book Lovers Club** _____

Mexican Train -Couples _____ **Couples Same Partner Bridge** _____

Dining Interests: Dine In _____ **Dine Out** _____ **Sunday Brunch** _____

PuPu Parties (Cocktail parties in members' homes) _____ **Mini group – 14 people** _____

Regular Group – 24 people _____