

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

**PLEASE COMPLETE THIS FORM AND MAIL 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: _____

Would you be willing to volunteer to be on one of our committees? Yes ___ No ___

Do you have computer skills? Yes ___ No ___ If yes, PC ___ Mac ___

Other organizations/Clubs in which you have participated

Offices and/or committee positions you have held:

Professional experience/talents/skills you might share:

What type of luncheon programs would you enjoy?

Please indicate the actives that are of interest to you.

ACTIVITIES:

DAYTIME & EVENING GAMES:

____ Social Bridge _____ Mexican Train _____ Bunco _____ Golf Annual Tournament
____ Duplicate Bridge _____ Book Lovers Club
____ Mexican Train (Couples or two singles)
____ Couples Same Partner Marathon Bridge
____ Hand & Foot (Couples or two singles)

DINING INTERESTS

____ Dine Out Dinner/Lunch
____ Sunday Brunch Bunch - sporadic
____ PUPU Parties (home cocktail parties) sporadic
 ____ Mini group 14 people
 ____ Regular group 24 people