

SOS Membership Form

PLEASE PRINT LEDGIBLY (For additional pages, please make copies)

Date _____

Shag Club Name _____

Address _____

Contact Person _____ Tel # _____

Email _____

Name(s): _____ Card # _____

Address: _____

City, State, Zip _____

Name(s): _____ Card # _____

Address: _____

City, State, Zip _____

Name(s): _____ Card # _____

Address: _____

City, State, Zip _____

Name(s): _____ Card # _____

Address: _____

City, State, Zip _____

Mail form to: Wanda Cavin, SOS Secretary 134 Venus Lane Mooresville, NC 28117

Or Scan and email: wbcavin@gmail.com

Mail check to: SOS - PO Box 4456 - North Myrtle Beach, SC 29597