



Peninsula Ski Club

Application for new membership ___ or renewal ___
(check one)

Name ___ Tom Sleckman ___ Date ___ 11/25/2018 ___
(if Family membership, give name and contact info for 2nd adult below)

Address & Zip ___ 1357 43rd Ave, San Francisco, CA 94122 ___

Phone: home ___ 415 664 6330 ___ work ___ cell ___ 415 846 2476 ___

Email ___ tomsleckman@cs.com ___ Date of Birth ___ 09/23/1950 ___

Name of 2nd adult in Family membership ___

Phone: work ___ cell ___

Email ___ Date of Birth ___

Driver's lic # (required for new members) state *California* ___ C5180599 ___

Name of spouse (if not Family membership) ___ Jocelyne ___

Names and years of birth for children ___

Emergency contact:

Name: ___ Joe Sleckman ___ Phone: ___ 701 335 3033 ___

Service to Peninsula Ski Club

Formal position currently held ___
(e.g., Board member, committee Chair)

What skill, assistance, project or other help you can offer to PSC, the lodge, membership, ski or social activity of the club

Have good computer and web skills. I am friend of member George Link of San Francisco ___

Membership Fees (check all that apply)

- X_ Regular \$100
- ___ Family \$150
- ___ Associate (must qualify to be Associate) \$50
- ___ Honorary (no membership fee)
- X_ Initiation fee \$100
- ___ Work party buyout (if no work party in past 3 years) \$200 (or \$250 for both adults in Family membership)
- ___ Large locker \$100
- ___ Small locker \$50
- ___ Total due to "Peninsula Ski Club"

PSC Board approval for new member ___ Date ___

Send application, payment, Indemnity Agreement, & Locker Agreement to Membership Chair: Bill Cohen 5669 Snell Ave. #340, San Jose, CA 95123. Any questions? Contact Bill at protouch@comcast.net or (408) 772-8157.