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**RVP MEMBERSHIP DUES through JUNE 30, 2024**

            INDIVIDUAL MEMBERSHIP    ($45)        $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

            FAMILY MEMBERSHIP           ($60)        $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

            DONATION TO RVP ( tax deductible)       $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

            TOTAL (check or credit card)                   $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please make checks payable to Ross Valley Players, or submit credit card information:

NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ZIP\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_EMAIL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Credit Card Type:    VISA\_\_\_\_\_\_\_\_\_        MASTERCARD \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Credit Card Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_VCC#\_\_\_\_\_

Expiration Date:\_\_\_\_\_\_\_\_\_\_\_\_\_

Name as it appears on card:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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***THANK YOU FOR SUPPORTING THE ROSS VALLEY PLAYERS.***

***MAIL TO RVP Membership and Donations, P.O. BOX 886, ROSS, CA 94957***