Colonial Shag Club, Inc.

P. O. Box 14581
Newport News, VA 23608-3608
Membership Application 2027

Use a separate form for each applicant

PLEASE PRINT LEGIBLY

Name: _____

Address: _____
Street

_____ _____ _____
City State ZIP Code

Phone: _____ Birth Month/Day_____/_____

Email Address: _____

			CIRCLE ONE
RENEWING - Pay by Dec 31st or Grace Period ending Feb. 1st			$25.00
Joining	**Initiation Fee**	**Membership Fee**	
Jan - Mar	$5.00	$25.00	$30.00
Apr - Jun	$5.00	$20.00	$25.00
Jul - Sept	$5.00	$15.00	$20.00
Oct - Dec	$5.00	$ 10.00	$15.00
			TOTAL DUE

I am 21 years of age or older. This information is true to the best of my knowledge. I agree to abide by the rules and bylaws of the Colonial Shag Club, Inc. I authorize the club to use my name, birthday (month and day) and/or photographic likeness in Club publications, the Club website, or the Club Facebook page. I agree that the Colonial Shag Club and its Board of Directors shall not be held responsible for any accidents, personal injury, or loss of any personal property associated with my attendance at, or participation in, any Club Function. I provide my personal information for club use only.

Signature of applicant_____**Date**_____

Submit completed application and dues (**check payable to Colonial Shag Club**) to address shown on top of form or submit at a club social. The Colonial Shag Club, Inc. is a private social club and operates under the IRS guidelines for a 501(c)(7) organization.

Received by: _____**Date:** _____

Cash_____**Check #**_____

Revised 11-7-2026