

Brew Angels Membership Form

Name: _____

Spouse's Name: _____

Please check: Renewal _____ New Membership _____

Address: _____ Phone: _____

City, State: _____ Zip: _____

E-MAIL: _____

Are you a B.J.C.P. judge ? _____ Interested ? _____

PLEASE READ AND SIGN BELOW:

I (we) the undersigned voluntarily join the BREW ANGELS HOMEBREW CLUB. I (we) absolve both the club and any member from responsibility of my (our) actions at the meetings or any club function. I (we) understand my (our) responsibilities of providing a designated driver and drinking responsibly in any club function and at any other time.

Signature: _____ Date: _____

Signature: _____ Date: _____

Renewal or new member dues: \$20.00 per year

Please mail your completed membership form and check payable to **Brew Angels** to:

Paul Harvey
1035 Piermont Way
Galt CA 95632

Don't forget to check out our web page - www.brewangels.com - for the latest news and updates.