Balloon Society of Kentucky, Inc.

P.O. Box 7661, Louisville, KY 40257-0661

Membership Application/Renewal

(All memberships expire December 31 each year)

Name:	
For renewals, only fill in	information that has changed from last year.
Pilot () Crewmemb	per () Junior Balloonist (age 13-18) (
Address:	
City:	State: Zip:
Birthday: (M)(D) Junior Balloonist only (Y)
Phone: Home:	Work:
Cell:	
E-mail address:	
Children:	Birthday:
Sponsor (new members	s only):
Dues: Regular Member Family Member Corporate mem Junior Ballooni	r* \$10.00 () bership** \$50.00 ()

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Name:	
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Pilot () Crewmember ()	Junior Balloonist (age 13-18) (
Address:	
City:	State: Zip:
Birthday: (M)(D)	Junior Balloonist only (Y)
Phone: Home:	Work:
Cell:	
E-mail address:	
Children:	Birthday:
	al \$25.00 () \$10.00 ()

^{*}There must be one regular member in the same household. Family members do not receive the Roster.

^{**} Corporate membership includes one regular membership with no addn'l fee

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