GREATER LEXINGTON NEWCOMERS CLUB

Application for New Membership

Eligibility

Club membership is open to residents who have lived in Rockbridge County or any of its municipalities no more than five (5) years when they join. To qualify for Club membership, one must (a) reside within the boundaries of Rockbridge County or one of its municipalities; or (b) have a residence with a Rockbridge address. Having met these requirements, any person wishing to become a member is accepted upon payment of dues.

What are the benefits of becoming a member?

Join and here's what you'll get:

- New friends.
- Three subsidized events: The Holiday Party, Summer Picnic, and Fall Event.
- Four or more Special Activities a year. Special Activities are one-time events offered on a first-come, first-served basis with costs paid by attendees.
- Interest Groups. Groups meet on a regular basis and include book, card and game clubs, dining in, dining out, wine tasting, yoga, and hiking.
- A newsletter via e-mail ten times a year with club news and information about upcoming events.
- Access the password-protected membership list on the Club website.
- Monthly Coffee Socials along with a brief business meeting and occasional guest speakers.
- A New Members Tea held in your honor when you first join the club.

How can I join?

Join at a monthly meeting or print and mail the New Member Application form along with payment of dues.

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I certify that I have been a resident of Rockbridge County for no more than 5 years and that I am presently residing in Rockbridge County or have a Rockbridge County mailing address (or a city or municipality in Rockbridge County). At least one member of a couple must meet these criteria. Dues: **Membership dues are \$25 per person**.

The Club year runs from September through August. New Members joining between March & June will pay one-half the annual dues per person. After June full dues will be applied to the upcoming year.

Signature_		Date of Application:
Applicant	1	
Last Name		First Name
Address		
		Zip code
Email address		Phone # ()
Amount e	nclosed for Applicant 1: \$	
Applicant	2: Spouse or Partner Living	in Same Household
Last Name		First Name
Email address		Phone # ()_
Amount er	nclosed for Applicant 2: \$	
How did y	ou find out about us?	
Where are	you relocating from?	
Please ma	ke check payable to: Greate	er Lexington Newcomers Club
Mail to:	Barbara Ekin, Membership	Chair
	24 Sky View Ln Rockbridge Baths, VA 244	73