

## **GREAT OHIO COASTER CLUB**

## CANADIAN MEMBERSHIP FORM

## **MEMBER INFORMATION**

| Full name  |             |                  |                     |                  |          |                         |                    |  |  |  |  |
|--|-------------|------------------|---------------------|------------------|----------|-------------------------|--------------------|--|--|--|--|
|  |             |                  |                     |                  |          |                         |                    |  |  |  |  |
| Street Address   |             |                  |                     |                  |          |                         |                    |  |  |  |  |
|  |             |                  |                     |                  |          |                         |                    |  |  |  |  |
| City, Province/Territory, Postal Code  |             |                  |                     | Birthday (MM-DD) |          | Previous Membership # ( | if known)          |  |  |  |  |
|  |             |                  |                     |                  |          |                         |                    |  |  |  |  |
| D : 01   | N. I        | D: 5 11A         |                     |                  |          |                         |                    |  |  |  |  |
| Primary Pho  | ne Number   | Primary E-mail A | ddress              |                  |          |                         |                    |  |  |  |  |
|  |             |                  |                     |                  |          |                         |                    |  |  |  |  |
| Secondary Pl   | hone Number | Secondary E-mail |                     |                  |          |                         |                    |  |  |  |  |
|  |             |                  |                     |                  |          |                         |                    |  |  |  |  |
|  |             |                  |                     |                  |          |                         |                    |  |  |  |  |
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|  |             |                  |                     |                  |          |                         |                    |  |  |  |  |
|  |             |                  |                     |                  |          |                         |                    |  |  |  |  |
|  |             |                  | MEMBERSHII          | TYPE             |          |                         |                    |  |  |  |  |
| All GOCC members receive access electronic editions of <i>The Streak</i> .   |             |                  |                     |                  |          |                         |                    |  |  |  |  |
| An adda members receive addess electronic editions of the streak.  |             |                  |                     |                  |          |                         |                    |  |  |  |  |
| NOTE: Holiday World requires a minimum \$20 membership to attend HoliWood Nights                                   |             |                  |                     |                  |          |                         |                    |  |  |  |  |
| We occasionally send notices and communicate by e-mail – check this box to opt out of email communications: $\Box$ |             |                  |                     |                  |          |                         |                    |  |  |  |  |
|  |             |                  |                     |                  |          |                         |                    |  |  |  |  |
|  | SINGLE      |                  | COUPLE   FA         |                  | FAMILY ( | MILY (UP TO 6) PEOPLE   |                    |  |  |  |  |
| ☐ Electronic (\$25)  |             |                  | ☐ Electronic (\$35) |                  |          | ☐ Electronic (\$40)     |                    |  |  |  |  |
|  |             |                  |                     | `` ′             |          | ,                       |                    |  |  |  |  |
|  |             |                  |                     |                  |          |                         |                    |  |  |  |  |
|  |             |                  |                     |                  |          |                         |                    |  |  |  |  |
|  | Name        |                  | E-mail Address      |                  |          | Birthday I '            | opt OUT<br>of club |  |  |  |  |
|  |             |                  |                     |                  |          |                         | e-mails            |  |  |  |  |
| For Family/<br>Couple  |             |                  |                     |                  |          |                         |                    |  |  |  |  |
| memberships,<br>list additional  |             |                  |                     |                  |          |                         |                    |  |  |  |  |
| members<br>here.   |             |                  |                     |                  |          |                         |                    |  |  |  |  |
| nere.  |             |                  |                     |                  |          |                         |                    |  |  |  |  |
| -  |             |                  |                     |                  |          |                         |                    |  |  |  |  |
|  |             |                  |                     |                  |          |                         |                    |  |  |  |  |
| Make checks payable to Great Ohio Coaster Club  Mail competed application to:                                      |             |                  |                     |                  |          |                         |                    |  |  |  |  |
| (Please allow 2 to 4 weeks for processing)  KENNY MYATT, MEMBERSHIP DIRECTOR                                       |             |                  |                     |                  |          |                         |                    |  |  |  |  |
| 1401 BUCKLAND AVE.   |             |                  |                     |                  |          |                         |                    |  |  |  |  |

**OFFICE USE ONLY** 

Replacement membership cards: \$5

(free if you renew early)

FREMONT, OH 43420

Questions? Call (855) 375-3940

| Date: | Check # | : Cash: | Amount: | Proc. BY | # |
|-------|---------|---------|---------|----------|---|
|       |         |         |         |          |   |