

THAMES CLUB

Admissions Committee Referral

I am proposing for membership

Name: _____

Home Address

Street: _____

Town & Zip: _____

E-Mail (H): _____

(O): _____

Phone: (H) _____

(O) _____

(C) _____

Full Member _____ Associate _____

Spouse/Significant Other

Name: _____

E-Mail: _____

Member References (3):

Employment

Company Name: _____

Company Address: _____

Other Organization Memberships

Interests/Hobbies

Proposing Member Signature/Date

Proposing Member bring or mail form to the Thames Club

