

N.A.S.F.

Netherlands Association of
South Florida

www.dutchclubsouthflorida.com

info@dutchclubsouthflorida.com



Membership dues Year **2016 - \$55*** per family
(maximum of 2 adults per membership)

Name: _____

Date of Birth(mm/dd/yy): _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell: _____

Email: _____

Are you interested in volunteering at our events? YES/NO

Do you have suggestions for events? _____

Please list all family members

First & Last Name: _____ Date of Birth (mm/dd/yy): _____

Disclaimer : I agree to hold harmless NETHERLANDS ASSOCIATION OF SOUTH FLORIDA and/or any persons who individually or as agents took part in any way in organizing and supervising the planned activities, for any injury or loss which may occur while I or any member of my family or my guest(s) are participating in these activities. I agree that I and those members of my family and guest(s) who are with me will participate in such activities at my (our) own risk.

Signature: _____

Date: _____

Please mail completed membership form with your check made payable to:
N.A.S.F. (Netherlands Association of South Florida)
1988 NW 112th Ave
Coral Springs, FL, 33071

*: **\$5 reduction** if your payment is received before January 31, 2016.

So if your pay **before** January 31, 2016 the membership fee is only \$50.