

MEMBERSHIP FORM

New Member	Renewing Member
	wendersnip kunder
Address:	
City:	State:
Zip Code:	Country:
Birthday (MM/DD/YY):	
	DIAN INFORMATION:
	ame:
	nail:
Parent/Guardian Ph	none Number:
How did you hear a	bout the Junior Power Pack?
ANNUAL MEMBE	ERSHIP FEE \$25*
Method of Payment	(circle one):
Check/Money Or (payable to the Green Bay Packer	der Cash Visa MasterCard AMEX Discove
Credit Card #:	
Exp. Date:	
3 Digit Security Co	de (back of card):
Zip Code:	
Name (as it appears on t	the card):
Please mail compl	eted form and payment to:
Junior Powe	
1265 Lomb	ardı Ave.

IS THE MEMBERSHIP A GIFT? (optional):