

BOCCE SONOMA

[Founded 2008]

Membership Application | Season Year: _____

Annual Dues **\$35.00** per person as **Regular Member** for each assigned league(s)
or as **Sub-Only Member** (a sub-only member does not play regularly on a specific league).

A **Regular Member** may substitute on other leagues at no cost.

Date:

Name:

Address:

City:

Zip:

Phone:

Email:

Make checks payable to: **Bocce Sonoma**

Send application and remittance to:

Bocce Sonoma Membership

P.O. Box 167

Sonoma, CA 95476

I would like to apply as: **Regular Member** **Sub-Only Member**

I am able to play bocce on (check as many as apply to you):

Sunday: AM PM Thursday: AM PM

Monday: AM PM Friday: AM PM

Tuesday: AM PM Saturday: AM

Wednesday: AM PM

Questions? Email Membership at boccesonomamembership@gmail.com