

LINDEN ATHLETIC BOOSTERS CLUB
20__ - 20__ MEMBERSHIP

Help us increase our membership by asking your friends and neighbors and anyone interested in supporting Linden High School Athletics and other sports programs in the Linden Community.

Send Membership Application to:

*Linden Athletic Boosters Club * PO Box 121 * Linden, CA 95236*

Name _____ Phone _____

Address _____ City _____

State _____ Zip _____ **E-mail** _____

Business \$25

Family \$15

Individual \$10

Please indicate if you would like more information to volunteer for any of the following:

Football/Soccer Snack-Bar Team Store @ games or LHS campus Dinner Events
 Advertise in Fall Sports Program Advertisement on Fall/Winter/Spring Sports Poster