



LAMAR COMMUNITY COLLEGE

Runnin' Lopes Booster Club

MEMBERSHIP APPLICATION

Name _____

Email Address _____ Phone: _____

Street or Box# _____

City _____ State _____ Zip _____

Circle Your Membership Type: (Individual) (Family)

Circle Your Level: (Bronze) (Silver) (Gold) T-Shirt Size (if applicable) _____

Member Dues \$ _____

Contacted By: _____ Date _____

PLEASE MAIL APPLICATIONS TO: Runnin' Lopes Booster Club, c/o Lamar Community College,
2401 South Main, Lamar, CO. 81052

MEMBERSHIP GRID – PICK YOUR MEMBERSHIP STYLE

Incentives >	Dues \$	Decal	Game Passes	Season Tix	T-Shirt(s)
MEMBER TYPE/LEVELS					
INDIVIDUAL					
<i>BRONZE</i>	25.00	YES	2		
<i>SILVER</i>	50.00	YES	4		1
<i>GOLD</i>	100.00	YES		1	1
FAMILY					
<i>BRONZE</i>	75.00	YES	6		
<i>SILVER</i>	125.00	YES	8		1
<i>GOLD</i>	175.00	YES		2	2