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| --- | --- |
| **Member Name(s):** |  |
| **Address:** |  |
| **Member #1 Email:** |  | **Cell:** |  |
| **Member #2 Email:** |  | **Cell:** |  |
| **Student-Athlete Name:** |  | **22/23 Grade:** |  |
| **Student-Athlete Name:** |  | **22/23 Grade:** |  |
| **Student-Athlete Name:** |  | **22/23 Grade:** |  |
| **Sports Participating In:** |  |
|  |  |
|  |
| **Interests/Comments:** |

**Please submit this application along with your $15 per member annual fee to the WABC for membership. Thank you.**

Make all checks payable to: **Wildcat Booster Club or WBC**

Mail to: WBC PO Box 841 Elgin, Texas 78621

For more information, email Elginathleticboosterclub@gmail.com