

**MEMBERSHIP INFORMATION**

*Today's Date* \_\_\_\_\_

Individual \$60 \_\_\_\_\_ Couple \$100 \_\_\_\_\_

Member 1 \_\_\_\_\_ DOB \_\_\_\_\_

Member 2 \_\_\_\_\_ DOB \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone # \_\_\_\_\_ email \_\_\_\_\_

Emergency Contact Name & phone:

\_\_\_\_\_

Payment method: Cash \_\_\_\_\_ Check \_\_\_\_\_ Charge \_\_\_\_\_

Credit Card # \_\_\_\_\_ 3-digit code on back \_\_\_\_\_

Name on card \_\_\_\_\_ Expiration date \_\_\_\_\_

May we email your newsletter? \_\_\_\_ Yes \_\_\_\_ No

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*Make checks payable to: EBSC*

18402 W. Bernardo Dr San Diego, CA 92127

858-487-9324

[www.edbrowncenter.org](http://www.edbrowncenter.org)

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**Office use only**

*Input* \_\_\_\_\_ *Card* \_\_\_\_\_ *Newsletter* \_\_\_\_\_ *Email Info* \_\_\_\_\_

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