

Membership Application
JOSIE'S AT THE LOCKHOUSE

MEMBERSHIP NUMBER _____

(PLEASE PRINT)

DATE _____ DOB _____

NAME _____

ADDRESS: STREET _____

CITY _____ STATE _____ ZIP _____

FAX _____

EMAIL _____

I agree to abide by the laws and rules of "Josie's". I understand that my membership is subject to approval by the membership committee and must be renewed annually. As of May 27, 2004 there will be a \$10.00 membership fee.

Submitted this _____ day of _____ 20____

Signature _____

Approved by membership committee this _____ day of _____ 20____

Signature Member of Membership Committee _____

FAX 870-793-7013 ANY QUESTIONS CALL 870-793-7000
MAIL TO: JOSIE'S - 50 RIVERBANK RD. - BATESVILLE, AR 72501
WEBSITE: www.josiessteakhouse.com
Steve Carpenter: n2157s@hotmail.com