

Kennewick High School Athletic
Booster Club Membership
C/O Kennewick High School
560 W 6th Avenue
Kennewick, WA 99336

Name: _____
Address: _____
City/State/Zip: _____
Phone: _____
Email: _____

Student(s) Name	Grade	Sport(s)
Would you like to volunteer at KeHS Athletic Booster Club Activities? Activities included are: Concessions, Clothing Sales, Golf Tournament, Parent Coordinator		Yearly Membership Dues \$10.00
I agree to abide by the Constitution and Bylaws of the Kennewick High School Athletic Booster Club.		
Signature: _____		
Yes, I would love to help! <input type="checkbox"/>		Date: _____
Not at this time. <input type="checkbox"/>		

Your Booster Club Membership can be sent to the address above.
Please make checks payable to KeHS Athletic Booster Club.

Payment Date: _____	Cash: _____
Rec'd By: _____	Check# _____

Booster Club Meetings are typically held on the third Wednesday of the Month at 7pm in the Commons. Please see the website or Facebook page for the most up to date information at www.kennewickboosters.org or facebook.com/kehsboosters.

Thanks for your support! Hope to see you there!

