Bobcat Club Application

Show your pride and support of JCJC.
Membership is open to alumni and friends alike.

Join Now!

□ Mr.
□ Mrs.
□ Ms.
□ Mr. & Mrs.

_____ _____ _____
Last name **First name** **Middle name**

_____ _____ _____ _____
Address **City** **St** **Zip**

_____ _____
Email address **Phone**

_____ _____
Dates attended JCJC **Major area of study**

_____ _____
Marital status **Spouse name (Include Maiden Name)**

Please list any involvement in sports, clubs, band, or other activities while at JCJC _____

_____

If Purchasing the family package, list children's names (18 or under) that should be included on the All Sport Ticket.

_____

_____

Please return with payment to:

Teresa Welch
JCJC Athletic Dept.
900 South Court St.
Ellisville, MS 39437

Ticket package (please check the appropriate line.)

Adult Couple **$185** _____

Family Package **$295** _____

Donation to Bobcat Club **$**_____

Total Amount Enclosed **$**_____