

Sun City Summerlin Computer Club
Member Data Form
 (Required Fields are in **Bold**)

Information from this form will be kept confidential and used only for Club administrative purposes.

Date ____ / ____ / _____

Member 1

Last Name: _____

First Name: _____

Assn No: _____

E-mail: _____

Experience: None Experienced
 Novice Expert
 Comfortable

Willing to Volunteer? Computer Related
 Non-computer Related

Previous Occupation?

Member 2

Last Name: _____

First Name: _____

Assn No: _____

E-mail: _____

Experience: None Experienced
 Novice Expert
 Comfortable

Willing to Volunteer? Computer Related
 Non-computer Related

Previous Occupation?

Sun City Address: _____	Sun City Phone: _____
City: _____	State: _____ ZIP: _____
Alternate Address: _____	Alternate Phone: _____
Alternate City: _____	Alternate State: _____ Alternate ZIP: _____

Number of x86 PCs: _____	Check Main x86 OS: <input type="checkbox"/> Win Vista <input type="checkbox"/> Win XP <input type="checkbox"/> Win NT/2K <input type="checkbox"/> Win 9x/ME <input type="checkbox"/> Linux
Number of Mac PCs: _____	Check Main Mac OS: <input type="checkbox"/> OS X <input type="checkbox"/> OS8/9 <input type="checkbox"/> OS 6/7 <input type="checkbox"/> Other