

2025



RENEWAL AND NEW MEMBER FORM

\$5.00/ year/ person

***Must be a current RCSC Cardholder**

Please Print

DUES: \$5 DATE: / / 2025 Amt. CASH or Check #

MR. RCSC # EXP, MRS. RCSC EXP

First: Male _____ Last: _____

First: Female _____ Last: _____

Phone: His (Home) _____ (Cell) _____

Phone: Hers (Home) _____ (Cell) _____

Email: His (Print) _____

Email: Hers (Print) _____

Address: _____ S.C. ZIP _____

Email: suncitygopclub@gmail.com Attn: Robert Wheat