

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 Computer Related
 Volunteer? Non-computer Related

Previous Occupation?

Member 2

Last Name: _____

First Name: _____

Assn No: _____

E-mail: _____
 @ _____

Experience: None Experienced
 Novice Expert
 Comfortable

Willing to Computer Related
 Volunteer? Non-computer Related

Previous Occupation?

Sun City Address: _____	Sun City Phone: _____
City: <u>LAS VEGAS</u>	State: <u>NV</u> ZIP: <u>89134</u>

Number of Win PCs: _____	Check Main Win OS: <input type="checkbox"/> Win 7 <input type="checkbox"/> Vista <input type="checkbox"/> XP <input type="checkbox"/> 9x <input type="checkbox"/> NT/2K <input type="checkbox"/> Linux
Number of Mac PCs: _____	Check Main Mac OS: <input type="checkbox"/> OS X.6 <input type="checkbox"/> OS X.x <input type="checkbox"/> OS 9/8 <input type="checkbox"/> Other