Membership Application
Windsor Recovery Club

I am applying for membership of the Recovery Club, Inc. I understand that I must:

- Have (90) ninety days of continuous sobriety is a requirement for membership
- Have obtained the signature of a current member to sponsor my membership to the club
- Agree to keep my dues current
- Read the By-Laws and Operational Procedures
- Follow the house rules

I understand that failure to do any of the above will result in termination of membership.

Signature:_____ Date: _____

I am being sponsored for club membership by (current member of Recovery Club):

Signature:_____ Date: _____

Member Information

Name: _____

Address: _____ Phone: _____

City_____ State/Zip:_____Email: _____

Date of Sobriety: ____/____/_____

Payment Options:

$50.00 Annually _____ **$25.00 Bi-annually**_____ **$15.00 quarterly** _____

Make Check Payable to The Windsor Recovery Club.

Drop payments off in bookstore slot or mail to: The Recovery Club
P.O. Box 1058
Windsor, CT 06095

Any questions please call the Recovery Club Bookstore at 860-285-0016