

**TEXAS CLOWN ASSOCIATION, INC.**  
**Membership Application**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip (+4) \_\_\_\_\_  
County \_\_\_\_\_ Telephone Number \_\_\_\_\_  
Date of birth \_\_\_\_\_ email \_\_\_\_\_  
Clown Name & clown type \_\_\_\_\_  
Other clown organizations of which you are a member:  
\_\_\_\_\_

**Membership Dues**

(Each new member must pay a one-time initiation fee of \$5)

Regular = \$30      Family (\*) = \$20      Junior = \$17.50

(\*) Each additional family member after the first Regular member

(\*) Name of family that is current "Regular" Member \_\_\_\_\_

**Total enclosed (fee plus \$5, unless renewing)** \_\_\_\_\_

TCA Member who referred you:

\_\_\_\_\_

Name	TCA #
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Mail completed application and fees to:

Texas Clown Association, Inc  
C.O. Cynthia Rice  
P.O. Box 441  
Chandler, Texas 75758

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