

**COLLECTORS CLUB INTERNATIONAL, Ltd. MEMBERSHIP APPLICATION**

The Executive Board of CCI, Ltd. invites you to enroll or renew membership in our club. The mission of CCI, Ltd. is to promote fellowship and encourage interest in collecting Campbell’s memorabilia. The membership year is January 1<sup>st</sup> through December 31<sup>st</sup>.

A Full Member receives a numbered membership card, four (4) issues of the club’s newsletter, a membership pin, and access to “member only” entrance on the club’s website. **PLEASE note on your renewal form how you want to receive your newsletter.**

An Associate Member must be from the same household as the full member. The associate member pays dues at one half the full membership rate and receives a numbered membership card, a membership pin, and access to “member only” entrance on the club’s website.

Each member is entitled to one vote, is eligible for election to the Executive Board and appointment to a committee. Only one member in a household can hold an elected office at any given time.

**Full Member \$30.00 Associate Member \$15.00**

Any questions, please phone Bonnie Baird, Treasurer (440) 567-9693 or e-mail: [bjbaird1261@gmail.com](mailto:bjbaird1261@gmail.com)  
Or Penny Weaver, Secretary (937) 833-5006 e-mail: [Wbrkv@aol.com](mailto:Wbrkv@aol.com)

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PLEASE *PRINT* OR AFFIX YOUR PERSONAL ADDRESS LABEL

**Membership Year 2019**

Full Member’s Name \_\_\_\_\_ Member No. \_\_\_\_\_

Associate Member’s Name \_\_\_\_\_ Member No. \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail Address \_\_\_\_\_

I want my Newsletter mailed to me  I will get my Newsletter from the Club web site

By my signature, I give permission to use the following information on the club’s website and in the newsletter. Signature: \_\_\_\_\_

Birth Date: Full Member \_\_\_\_\_ Associate Member \_\_\_\_\_ Anniversary \_\_\_\_\_  
Month/Day Month/Day Month/Day

**THIS MUST BE COMPLETED OR WE CANNOT PUT YOUR BIRTHDAY / ANNIVERSARY IN THE NEWSLETTER!**

If under the age of 18 Signature of Parent or Guardian \_\_\_\_\_

Please check: Full Membership \$30 \_\_\_\_\_ OR Full Membership & Associate Membership \$45 \_\_\_\_\_

**MAKE CHECK OR MONEY ORDER PAYABLE TO “CCI, Ltd.”  
Bonnie Baird, Treasurer  
4838 Bean Road, Rome, OH 44085**