

TAHOE EDGELAKE BEACH CLUB

REFERRAL PROGRAM

Your Name _____

Home Phone _____ **Work/Cell Phone** _____

Referral Name _____ Relative _____ Friend _____

Home Phone _____ Work/Cell Phone _____

Comments _____

Referral Name _____ Relative _____ Friend _____

Home Phone _____ Work/Cell Phone _____

Comments _____

Referral Name _____ Relative _____ Friend _____

Home Phone _____ Work/Cell Phone _____

Comments _____

Please return to: Wayne Wright PO Box 1679 Kings Beach, CA 96143