

Fort Worth Gem and Mineral Club Membership Application

Member: _____ Birthday: _____

2nd Adult Member: _____ Birthday: _____

Address: _____

City: _____ State: _____ Zip: _____

Cell Phone #: _____ (Text messages OK? _____)

Alternate#: _____ (circle one: Cell ___ Home ___ Work ___)

Email: _____

2nd member email: _____

Additional Family Members:

Child 1: _____ Birthday: _____

Child 2: _____ Birthday: _____

Child 3: _____ Birthday: _____

Child 4: _____ Birthday: _____

Interests: (Check all that apply)

Committees Field Trips Lapidary Rock Show Silversmith

Newsletter Social Presentations

It is agreed that the Fort Worth Gem & Mineral Club, or any of its members, shall not be held liable for any action or injuries received on account of or while engaged in any activities of or with this club, or any of its members. Juniors must be supervised by their parent or appointed guardian at all club meetings and functions

Signature of Applicant _____

Date _____