

MOHAVE COUNTY GEMSTONERS' MEMBERSHIP APPLICATION

Mail completed application to: PO Box 3992, Kingman, Az 86402

Location: Kathryn Heidenreich Senior Center, 1776 Airway AV, Kingman, AZ

Date/Time: Regular Meeting, 2nd Tuesday each month @ 7 PM

Web Site: gemstoners.org

Pot Luck Dinners March, June, September and December @ 6:30 PM

Name: _____ Spouse: _____
(Last, First) (Last, First)

Permanent Address: _____ City _____ State _____ ZIP _____

Seasonal Address: _____ City _____ State _____ ZIP _____

Months at Permanent Address (circle): J F M A M J J A S O N D

Months at Seasonal Address (circle): J F M A M J J A S O N D

Telephone Number: _____ Cell Number: _____

E-Mail Addresses: _____

Your Birth Month: _____ Spouse's Birth Month: _____ Anniversary Month: _____

Types of Membership: _____ Single (\$15) _____ Couple (\$20) _____ Family (\$25) _____ Junior (\$8)

(NOTE: Jr. Membership must be accompanied by at least one parent, guardian or responsible adult at all functions.)

Name Badges are to be worn at all Club functions. There is a charge for either a pin type or magnetic name badge.

Have you been a member of any other Gem and/or Mineral Club? _____ Yes _____ No If so, what

Offices/Chairs you held? _____

What lapidary or metalsmithing equipment do you own? _____

What interests brought you to our Club? _____

As a member, you will be encouraged to participate and support Club activities. There are several areas that require help in order to keep the Club functioning smoothly.

Date _____ Signature _____

Date _____ Signature _____

Date Dues Paid: _____ Amount: _____ Receipt Number: _____ (1)