

Suncoast Gem and Mineral Society, Inc.
Application for Membership

Name: _____
Last Name First Name Spouse's Name

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Phone: (____) _____ **Email:** _____

May we publish your contact information to our club members? ____ Yes ____ No

Occupation(s): Self: _____ Spouse: _____

Type of Membership: ____ Adult Single (\$20) ____ Family (\$30)

Family means spouse and/or at least one child under 18 living in your home.

WILL YOU DONATE TIME AND TALENT TO THE CLUB? ____ Yes ____ No

<u>Reason for Joining</u>	<u>Equipment Owned</u>	<u>Hobby Assets</u>
<input type="checkbox"/> Share Mutual Interest	<input type="checkbox"/> Saw	<input type="checkbox"/> Will show gem and mineral collection to club?
<input type="checkbox"/> Education	<input type="checkbox"/> Flat Lap/Cabber	<input type="checkbox"/> Hobby slides, CD, VHS
<input type="checkbox"/> Field Trips	<input type="checkbox"/> Grinder	<input type="checkbox"/> Other _____
<input type="checkbox"/> Club House	<input type="checkbox"/> Faceting Machine	
<input type="checkbox"/> Club Administration	<input type="checkbox"/> Other _____	

What other clubs are you (or have you been) a member? _____

What position(s) have you held in other clubs? _____

Service to the club: It is understood by joining this club (I/we) are willing to serve. The following committees have been checked where (I/we) have an interest and believe (I/we) can render assistance.

(Indicate all areas where you have an interest and can assist YOUR club)	
<input type="checkbox"/> A. Serve as a Committee Chairman <input type="checkbox"/> B. Serve on a Committee. <input type="checkbox"/> C. Assist VP with monthly membership meeting program. <input type="checkbox"/> D. Work with Field Trip Chairman on club trips. <input type="checkbox"/> E. Assist at annual show: Ticket Booth <input type="checkbox"/> F. Assist at annual show: Information Booth <input type="checkbox"/> G. Assist at annual show: Club Booth <input type="checkbox"/> H. Assist at annual show: Hospitality Room <input type="checkbox"/> I. Serve as club officer or board member/ Historian.	<input type="checkbox"/> J. Assisting Newsletter Editor (as needed) <input type="checkbox"/> K. Assist with Maintenance of the club house. <input type="checkbox"/> L. Assist in contacting membership by telephone. <input type="checkbox"/> M. Working as a club Instructor (cabbing, faceting, wire wrap, silversmith, etc.) <input type="checkbox"/> N. Hospitality for Monthly Meetings (set-up coffee and supplies)

References: Preferably local person who are in the hobby.

Name: _____ Phone: _____

Mail application to: Donna Sapp, 3200 74th Avenue North, St. Petersburg, FL 33702

Dues Paid? _____ Date: _____

Membership Chairman Treasurer Date Accepted to Club