



SOUTHERN MARYLAND ROCK AND MINERAL CLUB

(Please print legibly. Thank you.)

APPLICATION FOR MEMBERSHIP

Date: _____

Name: _____

Street: _____ Apt/Unit #: _____

City: _____ State: _____ Zip Code: _____

Cell Phone: _____ Needed for communication during Field Trips

E-Mail: _____ Club Newsletter and Trip Notifications are distributed by email

Applying for: Individual Adult Membership : (over 18) (\$25.00/yr)

Family Membership: (\$35.00/yr)

Family is defined as one address. Maximum 2 adults living in same home and children under 18 years of age residing at same address.

(For Family Membership Only)

Name: _____ adult

Name: _____ adult #2 - Cell Phone: _____

Name: _____ youth age ____

Name: _____ youth age ____

Name: _____ youth age ____

Name: _____ youth age ____

I do hereby waive all rights to hold The Southern Maryland Rock and Mineral Club, and its Officers liable for any personal injury or loss sustained by me or any member of my family while participating in club activities. I also agree to adhere to the rules and regulations of The Southern Maryland Rock and Mineral Club, as set forth by its bylaws.

Signature of Applicant: _____ Date: _____

Make your check payable to "David Lines". (Do not write anything else on that line) On the Memo Line write "SMRMC" (and nothing else)

Please pay at a meeting or the mail check and Application form to:

David Lines

7970 Bel Alton Newtown Road, La Plata, MD 20646