

**Membership Application**  
**Marysville Rock & Gem Club**  
P.O. Box 1721, Marysville, WA 98270  
**Fiscal Year October 2023 – September 2024**

Date: \_\_\_\_\_

Adult(s):  \$10 ea (Joining Aug-Mar)  \$ 5 ea (Joining Apr-July)  \$10 ea (Additional Year Membership)

Junior(s):  No Chg w/ Pay Adult # Memberships \_\_\_\_\_ x \$ \_\_\_\_\_ + xtra Yr \$ \_\_\_\_\_ = \$ \_\_\_\_\_

**Member Name:**

**Name Badge(Opt'l)**

Adult name: \_\_\_\_\_  
 \_\_\_\_\_

(\$11.00 ea)

NO / YES

Cell Phone: \_\_\_\_ (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

**Email Address**  
 Adult: \_\_\_\_\_  
 \_\_\_\_\_

NO / YES

Cell Phone: \_\_\_\_ (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

**Email Address**  
 Junior (under 18): \_\_\_\_\_  
 \_\_\_\_\_

NO / YES

Junior (under 18): \_\_\_\_\_

NO / YES

Junior (under 18): \_\_\_\_\_

NO / YES

Junior (under 18): \_\_\_\_\_

NO / YES

Address: \_\_\_\_\_ (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_  
Home phone if different from above

# Badges \_\_\_\_\_ x \$11.00 ea = \$ \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Newsletter Del By:  Email  Mail

Check here is you **don't** want any or all your contact info in the NW Federation Directory (avail to Federation members).

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The MRGC is a non-profit educational organization whose success is based solely on the active participation of its members. Being directly involved in the club helps you learn more quickly about the hobby, and you will become more familiar with your fellow club members! It usually only requires several hours a month. **"I would like to help with:"**

Field trips \_\_\_\_\_ Membership \_\_\_\_\_ Newsletter Articles \_\_\_\_\_ Programs \_\_\_\_\_ Junior Programs \_\_\_\_\_  
 Social Media \_\_\_\_\_ Kitchen/Hospitality \_\_\_\_\_ Rock Show Publicity \_\_\_\_\_ Other \_\_\_\_\_

***As a member of the Marysville Rock & Gem Club, I agree to abide by the Rockhound Code of Conduct of the American Federation of Mineralogical Societies (AFMS), and the By-Laws of the club itself at meetings, on field trips and all other club activities. I also understand that failure to pay membership dues in a timely manner will result in cancellation of membership.***

Member's Signature(s): \_\_\_\_\_ Date: \_\_\_\_\_

**(Please make checks payable to MRGC, Inc.. Form and payment must be submitted together!)**

**For MRGC Office Use Only:**

Payment Rec'd on: \_\_\_\_\_ Total Amount: \$ \_\_\_\_\_ Receiver's Initials: \_\_\_\_\_ Year(s) Paid For: **2024/2025/2026**

Membership Card(s) Issue Date: \_\_\_\_\_ Card Given to Member: \_\_\_\_\_ Card Mailed to Member: \_\_\_\_\_