

Jacksonville Gem & Mineral Society

6653 Powers Ave., Suite 132 Jacksonville, FL 32217

Membership Application

Membership Desired: Individual \$20/Year
 Family \$30/Year

Name _____ Birthdate: _____
(MO/DAY)

Address: _____

City: _____ State _____ Zip _____

Phone _____ Email: _____

Newsletter Delivery (pick one only): None Mail Email

Family Members :

Spouse: _____ Birthdate: _____

Child: _____ Birthdate: _____

Child: _____ Birthdate: _____

Other: _____ Birthdate: _____

Areas of interest (check all that apply):

- | | | |
|--------------------------------------|---------------------------------------|---------------------------------------|
| <input type="checkbox"/> Minerals | <input type="checkbox"/> Cabachons | <input type="checkbox"/> Inlay |
| <input type="checkbox"/> Rocks | <input type="checkbox"/> Faceting | <input type="checkbox"/> Casting |
| <input type="checkbox"/> Fossils | <input type="checkbox"/> Wire working | <input type="checkbox"/> Glass Beads |
| <input type="checkbox"/> Field Trips | <input type="checkbox"/> Beading | <input type="checkbox"/> Chain Maille |
| <input type="checkbox"/> Silversmith | <input type="checkbox"/> Intarsia | <input type="checkbox"/> Other: _____ |

Type of lapidary equipment owned: _____

*******PLEASE READ CAREFULLY*******

To qualify for membership, you MUST be willing to actively participate in the club. Participation includes attending the monthly meetings, serve/assist on various committees, volunteer help at the annual show, and subscribe to the By-Laws.

On what committee(s) or volunteer positions will you be helping the club? (check all that apply)

- | | | |
|--|---|--|
| <input type="checkbox"/> Refreshments | <input type="checkbox"/> Shop Help | <input type="checkbox"/> Field Trips |
| <input type="checkbox"/> Newsletter Articles | <input type="checkbox"/> Teaching Classes | <input type="checkbox"/> Junior Field Trips |
| <input type="checkbox"/> Meeting Programs | <input type="checkbox"/> Junior Advisor | <input type="checkbox"/> Annual Show Committee |
| <input type="checkbox"/> Silent Auction Assist | <input type="checkbox"/> Voice Auction Assist | |

Where could you be of assistance at our annual show?

- | | |
|---|---|
| <input type="checkbox"/> Ticket taker at door | <input type="checkbox"/> Security (unarmed) |
| <input type="checkbox"/> Setup (includes assembling displays) | <input type="checkbox"/> Vendor Hospitality |
| <input type="checkbox"/> Takeown (includes breakdown of displays) | <input type="checkbox"/> Demonstrations |

I agree to promote the objectives of the Society and to meet or surpass the requirements of the Society in regards to active membership. I also understand that failure to pay membership dues timely will result in suspension of membership.

Signature: _____ Date: _____

Board Process Date: _____ Effective Date: _____