

Date of Application: _____

Member Number: _____

CENTRAL MICHIGAN LAPIDARY & MINERAL SOCIETY

PO Box 24202, Lansing MI 48909

www.michrocks.org



Application for Membership

Family Membership \$15.00 Adults in same household, Children under 18

Name: _____

Phone: () _____ Email: _____

Address: _____ City: _____

State: ____ Zip: _____

Names of Additional Household & Email Address: Please include age of children

Please tell us you're (I) Interests, (H) Hobbies, (T) Talents:

____ Archaeology ____ Collecting ____ Fossils ____ Jewelry Making ____ Metalcraft ____ Tumbling
____ Beading ____ Faceting ____ Geology ____ Lapidary Crafts ____ Mineralogy ____ Wire craft
____ Carving ____ Fluorescents ____ Intarsia ____ Micromounts ____ Photography Other: _____

CLUB FUNCTIONS Would you be interested in helping with:

____ Field Trips ____ Contributing to Newsletter ____ Presenter ____ Board Position ____ School Liaison
____ Silent Auctions ____ Annual Club Rock Show ____ Hospitality ____ Annual Banquet ____ Handy Person
____ IT/Web Design

Signature of Applicant

Endorsed by (Society Member) _____

Membership badges are available for \$7.00 ea.

If you would like one, please print the names

Please return completed application with payment to the Membership Chair

OR

Mail completed Application with payment to: CMLMS, PO Box 24202, Lansing, MI 48909

Checks payable to: CMLMS

Annual Dues for the Calendar Year are due in January.

For Club Use Only

Received by Approved Date: _____

Date Received: _____

Amount Paid: _____

Check # / Cash: _____

NAME BADGE:

Badge Ordered _____

Badge Delivered _____

ROUTING:

____ President

____ Membership Chair

____ Publications/Web