

**EAST TEXAS GEM & MINERAL SOCIETY
MEMBER REGISTRATION FORM**



Name(s): _____ Anniversary _____ Birth Date: _____ Adult: ___ Jr. ___

Address: _____

City: _____ State: _____ Zip: _____

E-mail: _____ Newsletter via e-mail? Y ___ N ___

Special Interest in the hobby: _____ Date Paid: _____

Home Phone: _____ Work Phone or Cell: _____ Dues Paid: \$ _____