

DATE \_\_\_\_\_

**MEMBERSHIP APPLICATION**  
Central Virginia Coin Club

NAME (Please print) \_\_\_\_\_

FULL ADDRESS \_\_\_\_\_

(City, State, Zip) \_\_\_\_\_

PHONE NO. \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

CLUB INTERESTS: \_\_\_\_\_  
\_\_\_\_\_

NAME THE AREA (S) WHERE YOU WANT TO HELP THE CLUB:  
\_\_\_\_\_

IS THERE AN OFFICE YOU WOULD LIKE TO HOLD IN THE CLUB?

\_\_\_ YES \_\_\_ NO. If yes, name the office. \_\_\_\_\_

IS THERE A PROGRAM YOU CAN PRESENT? Please check one.

\_\_\_\_\_ Yes \_\_\_\_\_ No

WHAT WOULD YOUR SUBJECT BE? \_\_\_\_\_

**Membership Dues-Annual (January 1-December 31)**

Make check payable to Central Virginia Coin Club. New applications accepted between October 1 and December 1 are paid in full for the following calendar year.

- |  |                         |
|--|-------------------------|
| - \$10 Individual                                  | - \$15 Family           |
| FREE <del>18</del> Junior ( <sup>18</sup> & under) | - \$25 Individual 3 yrs |
| - \$37.50 Family 3 years                           | - \$100.00 Lifetime     |