

TRUMPETER TABLETOP GAMES SOCIETY

MEMBERSHIP REQUEST FORM

MEMBERSHIP No.	FILLED IN BY SOCIETY	YEAR	DATE
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FIRST NAME			
LAST NAME		AGE	
ADDRESS		APT No.	
CITY		POTAL CODE	
PROVINCE/STATE/COUNTRY			
PHONE	CELL	HOME	WORK
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
EMAIL ADDRESS			
DO YOU WANT TO RECEIVE CLUB NEWS/FRIDAY GAME NIGHT PEL? (max of 4 emails are sent per month)			
EMAIL NEWS SERVICE		YES	NO
		<input type="radio"/>	<input type="radio"/>
I would prefer to have my correspondance via (Check One)			
EMAIL	POSTAL MAIL	AT CLUB EVENTS	
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

MEMBERSHIP TYPE (Check One)	
REGULAR MEMBERSHIP <input type="radio"/>	ASSOCIATE MEMBERSHIP <input type="radio"/> <small>(ages 14 -18)</small>

MEMBER SIGNATURE _____

GAMING INTERESTS (Please check any/all applicable)	
HISTORICAL <input type="radio"/>	BOARDGAMES <input type="radio"/>
FANTASY <input type="radio"/>	MINIATURES <input type="radio"/>
SCIENCE FICTION <input type="radio"/>	ROLE PLAYING GAMES <input type="radio"/>
GAMES WORKSHOP <input type="radio"/>	CARDGAMES/CCG's <input type="radio"/>
OTHER GAMING INTERESTS <input type="radio"/>	
GAMING GROUP/CLUB	

VOLUNTEERING FOR THE TRUMPETERS (Please check any/all applicable)	
HOSTING <input type="radio"/>	CORPORATE SPONSORSHIP <input type="radio"/>
VOLUNTEERING <input type="radio"/>	SELLING/VENDOR TABLE <input type="radio"/>
EVENT SUPPORT <input type="radio"/>	WEBSITE SUPPORT <input type="radio"/>

HOW DID YOU HEAR ABOUT THE TRUMPETERS? _____

Mail Form to: **Trumpeter Tabletop Games Society: PO Box 83090, 4827 Kingsway, Burnaby, BC Canada V5H 4T0**
 or give this filled out form to a club executive member at *Friday Game Night* or at the *Trumpeter Salute* convention.
 All information collected will only be used for official Trumpeter Tabletop Games Society business and will never be given out/sold or otherwise distributed.