

Membership Form TOWN San Marcos Chapter

Name _____

Email _____

Address _____

City _____ State: TX ZIP _____

Phone: work _____ Home _____ Cell _____

Please check your favorite activities below:

- | | | |
|---|--|---|
| <input type="checkbox"/> Archery | <input type="checkbox"/> Backpacking | <input type="checkbox"/> Bicycle Touring |
| <input type="checkbox"/> Bird Watching | <input type="checkbox"/> Camping | <input type="checkbox"/> Canoeing |
| <input type="checkbox"/> Climbing | <input type="checkbox"/> Conservation | <input type="checkbox"/> Fishing |
| <input type="checkbox"/> Flyfishing | <input type="checkbox"/> Hiking | <input type="checkbox"/> Horseback Riding |
| <input type="checkbox"/> Kayaking | <input type="checkbox"/> Knot Tying | <input type="checkbox"/> Mountain Biking |
| <input type="checkbox"/> Mountaineering | <input type="checkbox"/> Natural History | <input type="checkbox"/> Nature Crafts |
| <input type="checkbox"/> Orienteering | <input type="checkbox"/> Outdoor Cooking | <input type="checkbox"/> Plant ID |
| <input type="checkbox"/> Photography | <input type="checkbox"/> Scuba Diving | <input type="checkbox"/> Survival Skills |

Please note any other interests you have

Membership Information

Make your check to TOWN and send along with this completed form to:

Ann Allen
P. O. Box 535
Martindale, TX 78655

Or come to our next meeting. Dues are \$20, payable Jan. 1. If you join after Aug. 1, only \$10

For more information email Ann Allen _____ or _____ Judy Aswell _____

Release of Responsibility

By signing this form, I am hereby releasing the TOWN San Marcos Chapter, its officers, members, representatives, organizers, and sponsors from liability for injury to myself or damage to my property as a result of participating in TOWN activities. I assume all of the risk and accept personal responsibility for any damages, personal injury, permanent disability, or death.

(Signature) _____