



Membership Application

(It would be greatly appreciated if you would print clearly)

Status (MUST CHECK ONE)	Annual Membership	Newsletter Receipt Method
<input type="checkbox"/> New <input type="checkbox"/> Renewal <input type="checkbox"/> Information Change <input type="checkbox"/> Addition to Household	<input type="checkbox"/> Student.....\$ 10 <small>(Proof of current enrollment required)</small> <input type="checkbox"/> Individual..... \$ 20 <input type="checkbox"/> Couple..... \$ 25 <input type="checkbox"/> Household.... \$ 30	<input type="checkbox"/> Online..... FREE <input type="checkbox"/> US Postal Service... \$10.00 Additional

Address _____

(If you have a box at Post Options Business Center, We would like to use that address to help reduce our mailing expenses. Thanks.)

City _____ **State** _____ **Postal Code** _____

Country _____

	Member	Member Partner (if couple)	Member Household (add additional sheets if necessary)
Name:			
Birth Date:			
Phone:			
Email:			

Committee Participation

Seattle Men in Leather is a social organization that relies heavily on its Board & members to plan and provide club activities. On which committees would you be interested in participating?

- | | | |
|--|--|--|
| <input type="checkbox"/> Equinox (Leather Run)
<input type="checkbox"/> Finance
<input type="checkbox"/> Education
<input type="checkbox"/> Dining
<input type="checkbox"/> Social
<input type="checkbox"/> Media | <input type="checkbox"/> Equinox (Leather Run)
<input type="checkbox"/> Finance
<input type="checkbox"/> Education
<input type="checkbox"/> Dining
<input type="checkbox"/> Social
<input type="checkbox"/> Media | <input type="checkbox"/> Equinox (Leather Run)
<input type="checkbox"/> Finance
<input type="checkbox"/> Education
<input type="checkbox"/> Dining
<input type="checkbox"/> Social
<input type="checkbox"/> Media |
|--|--|--|

I certify that I am 21 years of age or older, agree and consent to membership with Seattle Men in Leather ("SML"), agree to and abide by the by-laws and rules of SML, a copy of which I have been advised is available on www.seattlemeninleather.org or by hard copy upon request. I understand that my personal information on this application shall be kept by the organization for its own use and will not be released to outside parties without my consent. I agree that I will not at any time hold SML, its officers, members, or any other entity associated with SML liable for any type of injury, physical or otherwise, which my property or I may sustain as a result of my involvement in SML, which includes any harm done at any gathering of SML members, planned or spontaneous, including the home of SML members. I assume total responsibility for my personal actions, and understand that the Board of SML reserves the right by a simple majority to decide now of hereafter to refuse or terminate my membership with or without cause. I am aware that group photos and/or video may be taken at our events. I understand that contributions or gifts, including membership dues, are **NOT** deductible for federal income tax purposes.

FOR FURTHER INFORMATION, PLEASE CONTACT GENE ROMAINE, MEMBERSHIP COORDINATOR, AT:
MEMBERSHIP@SEATTLEMENINLEATHER.ORG - OR - CALL (206) 898-2281.

Signature: _____

Date: _____

Send check or money order made out to "Seattle Men in Leather" with your completed application to: Seattle Men in Leather, 1122 East Pike St, PMB #1199 Seattle, WA 98122