



Realms of Avalon MEMBERSHIP FORM

REAL NAME: _____ Date of Birth(M/D/Y): _____

Subdivision: _____ Realm: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ Date: _____

Phone: _____ E-Mail: _____ Minor or Dependant? Yes

Primary Family Member: (for family Memberships)

I am aware of the potential risks of the activities in this club, and will not hold Realms of Avalon, Inc.. and/or its chapters/ persons responsible for loss of property, injury, or care of dependants. I will engage in any activity or gathering safely and with care for self and others. I take responsibility for awareness of my own health concerns and medications, safe environment, and the care and safety of any human or animal dependants in my care. Children and dependants are solely the responsibility of parents or designated legal guardian(s).

*I have read and agree to the Waiver
Guardians please sign for minors or dependants.*

MEMBERSHIP BENEFITS: Participate in point bearing or fun tournaments, participate in contested wars of secession. Earn ranks, knighthoods, titles, and related honors/positions. Eligible to hold officer positions. Ability to vote on and/or submit business matters in parliament. Register/reserve heraldic devices, badges, and crests. Included in population count. Member is counted in group Insurance.

FAMILY MEMBERSHIP: Price reduction for groups of people living together and counting as a family and/or dependants for tax purposes. (i.e. married couple, parents and kids) Cap is maximum price paid, though *additional members still need to turn in their own membership form and waiver.*

Annual Renewal Date: Jan 1st

Full Membership

Select Pro-rated Quarter

- \$30 1st Qtr: Jan., Feb, March
- \$23 2nd Qtr: April, May, June
- \$15 3rd Qtr: July, Aug. Sept.
- \$10 4th Qtr: Oct., Nov., Dec.

Family Memberships:

1st, 2nd, 3+: Main member, and amount for each additional person in family; pro-rated

- 1st Qtr: 1st, \$30; 2nd \$23; 3rd \$15;
Family Cap Max: \$68
- 2nd Qtr: 1st \$23; 2nd, \$15; 3+ \$10
Family Cap Max: \$48
- 3rd Qtr: 1st \$15; 2+ \$10
Family Cap Max: \$35
- 4th Qtr: 1st \$10; 2+ \$10
Family Cap Max: \$30

Version 4.0
2007

Imperial
Initial

Date
Received

One form per person!

Please read in FULL and **PRINT NEATLY.** No cash, please. Checks or Money Orders should be payable to:

Realms of Avalon, Inc.
PO Box 3232
Moscow, Idaho
83843-1908

SEND DIRECTLY TO AVALON

Forms and Money are not collected locally.

SIGN BELOW FOR MEMBERSHIP CARD:

I have read and signed the waiver:

Real Name (print)

Signature

Membership Form Instructions

Welcome to the Realms of Avalon!

This is some information for your mundande convenience.

When getting a membership, send the form DIRECTLY to the address on the form. Memberships are NOT collect locally. Your local chapters may ask for a copy of your membership form for local records, and that's fine. But membership fees need to be send directly to the address on the form. When sending fees, send a CHECK or MONEY ORDER. Do not send cash. Also, do not give cash to the local group and let them write a check. These steps are for your protection.

If you are getting a family memebership, please write the name of the main/first family member in the space provided.

If you lost your membership card and want another one, then you may request one by sending in a new form with the bottom signature filled out. Just write replacement card in the top margin and send with \$2.00 to cover card and mailing costs.

And lastly, to ensure speedy returns, don't forget to sign the waiver for the back of your card!

Any questions? Ask a local officer, or email avalon@realmsofavalon.org