ANCIENT ONES OF MAINE
MEMBERSHIP REGISTRATION FORM

Membership Type: (Please check one)

Family ($10)__ Single ($10)__ Junior ($5)__(Under 18 but not included in a family membership)

Family membership includes you, your spouse/partner and any children under the age of 18. Other family members over the age of 18 need a separate registration form.

YOUR NAME:_____

ADDRESS:_____

CITY:_____ **STATE**_____ **ZIP:**_____

PHONE:_____ **E-MAIL:**_____

LIST ALL OTHER FAMILY MEMBERS TO BE INCLUDED IN THIS MEMBERSHIP:

SPOUSE/PARTNER:_____

PHONE:_____**EMAIL:**_____

CHILDREN

NAME:_____**RELATIONSHIP:**_____**Age:**___

NAME:_____**RELATIONSHIP:**_____**Age:**___

NAME:_____**RELATIONSHIP:**_____**Age:**___

NAME:_____**RELATIONSHIP:**_____**Age:**___

Person to notify in case of emergency:_____

Phone: _____ Relationship:_____

Medical conditions and/or allergies:_____

Interests/skills:_____

Signature:_____ Date:_____

Parent or Guardian Signature_____
(If Junior Registration)

Send Application and check to:
The Ancient Ones of Maine
121 Huntington Hill Rd.
Litchfield, Me 04350