



# Fort Bend Astronomy Club

## Membership Application Form

Name:

Address:

Phone (Home):

Phone (Cell):

Birth Date:

Email Address:

Hobbies or Special Interests: (i.e. bird watching, photography, astrophotography, etc.)

I / my family would be interested in participating in an astronomy related mentoring program [Yes] [No]

I / my family would like to attend a training session in the East Dome [Yes] [No]

**Annual Dues are \$30.00 for Regular Membership**

**\$5.00 per family member for Associate Membership**

Please bring membership form and annual club dues to the next monthly club meeting. Ask for the club treasurer. Or, email the membership form to: fbcastro@gmail.com

Our Mailing Address is:

Fort Bend Astronomy Club

P.O. Box 942

Stafford, Texas, 77497-0942

If applying for club membership by U.S. mail, please include check for annual membership dues, payable to: Fort Bend Astronomy Club. If applying for club membership by Email, please bring annual club dues to the next club meeting, or mail annual club dues to the above address.

By applying for and joining the Fort Bend Astronomy Club, I have read and agree to abide by the FBAC Code of Conduct, found at <http://www.fbac.org/policies.htm>

Applicant Signature: \_\_\_\_\_

Application Date: \_\_\_\_\_