

Sierra-Diablo

Membership Application

Name: _____ Telephone: _____

E-mail: _____ (required)

Address: _____

The following information is requested so that we have an idea of each member's collecting categories to be included in the our membership listing.

General Collector _____ (yes) _____ (no) Favorite categories...

1. _____ 2. _____ 3. _____

4. _____ 5. _____ 6. _____

NO DUES!

Birth date (month/day): _____

Signature: _____

Please send application to: Greg Lund (greglund@aol.com), 7000 Rainswood Ct., Bethesda, MD 20817-2231.....AND WELCOME TO SIERRA-Diablo and a great hobby!

