



West Georgia Coin Club

Jr. Membership Application

(Junior Member must be under the age of 16 to qualify)

Name: _____ Date of Birth: _____

Address: _____

Home Phone: _____ Work/Business Phone: _____

Cell Phone: _____ Email Address: _____

Recommended by: _____

What do you collect? _____

References: _____

How did you find out about us? _____

Applicant Signature:

Application read this _____ day of _____ 20____.

Approved _____ Denied _____

Officer Signature

Junior Membership will be awarded on participant's third (3rd) visit.