

Alabama Mineral & Lapidary Society

Membership Renewal Application

rev. 11.12.2023

Renewal Reinstatement

Date _____

Family \$25 Single \$20 Student \$15

(Please write legibly so we can record your information correctly)

Adult Head of Household _____ Birthday ____/____

Address _____ City _____ State ____ Zip _____

Email address _____

Cell Phone No () _____ - _____

Spouse or Other Adult _____ Birthday ____/____

Email address _____

Cell Phone No () _____ - _____

Names of Children 17 years or under living at home	Age	Birthday
_____	____	____/____
_____	____	____/____
_____	____	____/____
_____	____	____/____
_____	____	____/____

Remit this completed form along with your check payable to:
Alabama Mineral & Lapidary Society and mail to: AMLS - 8036 Parkway Drive Leeds, Alabama 35094.

(for office use only below)

Received by _____ **Date** _____ **Amount Paid** _____

Payment Type: _____ Confirmation No: _____ Welcome Email: ___ Info Confirmed ___ Receipt No: _____ Date: _____