

Membership Application

Website: www.RNBAtlanta.com

Voice Mail: 678-723-5762 E-mail: info@RNB.com



BY SIGNING BELOW, YOU AGREE TO THE FOLLOWING:

- Confidentiality Conditions** - Rainbow Naturist Brotherhood, Inc. is a private membership organization open to all of its members. The contract information contained in this application will be treated as confidential by RNB, Inc. & as such will be used only for a limited-access online newsletter, RNB mailings & activities, as well as listed in the internal membership directory. The use of membership contact information is limited to RNB members & associated RNB club leaders.
- Non-Dissemination Agreement** - I/we agree to keep confidential RNB mailings, membership directories & other information provided to me/us by RNB, & under no circumstances shall I/we share such information with non-RNB members or use for commercial purposes.
- Waiver of Liability** - In accordance with Georgia Code Ann. 102-16 (1968), which statute allows a person to waive his right to bring an action of law founded on an incurred injury, and as of the date of my/our signature/s below, I/we release Rainbow Naturist Brotherhood, Inc. and RNB officers & committee chairs from all claims which may arise during transportation to or from an RNB, Inc. activity and /or during any RNB, Inc. activity. Furthermore, I hereby release the host or hosts of any said activity from all claims which may arise during transportation to or from an RNB, Inc. activity and/or during any RNB, Inc. activity.

Signature (R or P1): _____ Date: _____

Signature (P2): _____ Date: _____

For Club use Only

Form Revised 5/25/18

Roster: _____

Evite: _____

Amount Paid: _____

New Member Renew

Membership Fees are for one full year from date of receipt.

PLEASE PRINT CLEARLY

\$30 Individual 1 year \$45 Couple 1 year \$15 Youth 1 year (18-35)

Last Name (R or P1) _____ Contact Telephone _____ Date of Birth _____

First Name (R or P1) _____ E-mail Address (YOURS) **ALL CAPS FOR CLARITY** _____

Street Address _____ City _____

State _____ Zip Code _____ City Area (Buckhead, East Atl): _____

Interested in hosting for RNB? YES NO House Parties Receive \$125.00

RNB shares Last, Nick Names & City Area with RNB members. Check info willing to share with members.

E-MAIL ADDRESS PHONE HOME ADDRESS B'DAY MONTH/DAY CARPOOL INTEREST?

PARTNER INFORMATION IF APPLYING FOR COUPLE MEMBERSHIP (Must live at the same address to qualify)

Last Name (P2) _____ First Name (P2) _____ Date of Birth _____

Contact Telephone (PARTNER) _____ E-mail Address (PARTNER NEED DIFFERENT ADDRESS) **ALL CAPS FOR CLARITY** _____