Minnesota Naturists Membership Application

Your application must be accompanied by a copy of your drivers license (which must be presented when you first attend an activity). How can we contact you?

Ma	iling address:							
	Dity			Zip				
'	I/we do not have Internet access and would like to receive newsletters in the mail.							
Phone(s) (we try to be discrete, but only list numbers it would be ok to call)								
		Kind (home, office,						
	Phone number	cell, etc)	Whose (if	applicable)				
Em	ail address: (optional)							
	Email address							
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Minnesota Naturists conducts a review of public records to help ensure that, as required by our bylaws, a member "subscribes to the purpose stated in these bylaws [and] whose interests are not adverse to the purposes of Minnesota Naturists and its membership..." As stated in our bylaws, "The purpose of this organization is to encourage acceptance of the human body and of nudity as its natural state; to expand the opportunities for people in our region to be nude, individually and socially; to increase public acceptance of nudity; and to advocate public policy that is more accepting of nudity."

Although Minnesota Naturists attempts to attract members whose behavior requires no apology, we cannot guarantee that any individual will not or has not acted inappropriately.

I/we agree to this purpose and wish to join Minnesota Naturists

Date:		7		
	Diago print namo	Cignoture (II I	Dues	
	Please print name	Signature (all applicants must sign)	(1 year)	
1st member			\$20.00	
2nd member			\$5.00	
3rd member			\$5.00	
	\$55.00			
			Total:	

Please enclose check or money order (no cash in the mail, please) and send to:

Minnesota Naturists 1547 University Ave W #401 St Paul MN 55104

For office use only			
DB			
Web			
Letter			

Print comments, including additional names, phone numbers, etc., on the reverse.