LearningQUEST Membership Application

(Please complete legibly)

Annual Membership Dues: $20.00 per calendar year

☐ **New Member**

☐ **Renewing Member** **Membership Number: _____**
(bottom left corner of your name badge.)

Circle One: Mr. Mrs. Dr. Ms. Other

First Name: **Last Name:**

Name on Badge: SAME AS ABOVE **OR**

Address:

Street/ P. O. Box/ Apt. #

City **State** **Zip Code**

Phone: ( ) - **Cell Phone: ( ) -**

E-mail Address **How did you hear about LearningQUEST?**

LQ Member that suggested you join (if applicable)

Please make your checks payable to: LearningQUEST

You can mail to: LearningQUEST, ATTN: Membership· P. O. Box 2387· Huntsville AL 35804

- **Reminder you can submit one check for both Membership & registration and for multiple persons. Just clip all the forms together with one check on the front and submit. We need separate forms for each person due to the data entry process**

LearningQUEST assumes no liability for any damage or personal injury sustained when a member is participating in any LearningQUEST-sponsored programs. A separate "Waiver of Liability" may be required for participation in some activities.

Membership implies permission to use your photo for LearningQUEST publicity, however if you do not want your photo used, please notify the photographer.

Please visit our website, www.LQUEST.org for more information.