

ROCKY MOUNTAIN PYROTECHNICS GUILD (RMPG)

Application for Membership

Name _____ Date of Birth _____

Street Address _____

City, State, Zip _____ Email _____

Home Phone _____ Work Phone _____ Cell _____

Name of member/s recommending you _____

If family membership: Spouse/partner Name _____

Spouse/partner Email: _____ Spouse/partner Cell _____

Names and Date of Birth for members of your immediate family who may attend club events

Initial Membership Applicants must be at least 18 years of age.

I am enclosing (please check one)

_____ \$150.00 (\$50. Single annual dues plus \$100. Initiation fee); 1 vote, 1 member attending functions)

_____ \$185.00 (\$85. Family annual dues plus \$100. Initiation fee); 2 votes, immediate family under 21
(or under 24 and in college) attending functions)

_____ \$25.00 RMPG Supporting Member (Annual dues which can be applied toward a Single or Family
membership. No signature or copy of driver's license required for Supporting Members. Supporting
Members have no vote and are not allowed to participate in events.)

_____ Donations beyond or instead of membership dues are tax deductible. RMPG is a 501c3 Charitable Organization.

Pictures of my family and/or myself may _____ or may not _____ be used in RMPG newsletters without my consent.
(Please check one choice)

Pictures of my family and/or myself may _____ or may not _____ be used on the RMPG website without my consent.
(Please check one choice)

DISCLAIMER: By signing this form, members agree to indemnify and hold harmless the Rocky Mountain Pyrotechnics Guild and each of its members, directors, officers, and successors from and against all claims, damages, injuries or consequences arising out of any direct and/or indirect or collateral participation in activities associated with Rocky Mountain Pyrotechnics Guild, including displays, demonstrations, seminar attendance, hands on training and assembling, educational material (including all processes and products covered in such displays, demonstrations, seminars, training, assembling, and educational materials) and other activities by the undersigned persons and for their minor children. Member is aware that RMPG insurance does NOT cover medical care in the event of an accident or injury. Registrants agree that any necessary medical treatment is the financial responsibility of the participant.

Registrants have read and agree to follow and be bound by the RMPG Bylaws and Safety Guidelines.
Registrants agree to the possibility of background checks in accordance with RMPG Bylaws, Colorado State
Laws and the United States Code of Federal Regulations.

Failure to comply with the Bylaws and Safety Guidelines may result in revocation of all privileges and/or
removal from said function or premises as decided by the Safety Director or any RMPG Officer.

I certify that the information in this application is true.

Signature of Initial Member: _____ Date: _____

Signature of Voting Spouse: _____ Date: _____

**Send completed and signed form with your check and a copy of your driver's license to:
RMPG; 8658 W. Wesley Pl.; Lakewood, CO 80227**