



River City GEMS

"Celebrating Feminine Expression"



Membership Application

The River City Gems has a mission to provide transgender individuals, their partners, and their families with opportunities to socialize in a personally affirming, safe, and supportive environment. We also strive to raise awareness of the transgender community and to promote a positive image to business owners, the media, and the general public.

MEMBER	Member Name: _____	Mailing Name: _____ <i>(optional)</i>
	Address: _____ <i>(optional)</i>	_____ City _____ State _____ Zip
	Email: _____	Phone: _____ <i>(optional)</i>
	_____ Birthday Month and Day: _____	_____
	_____	_____ <i>I am 18 years of age or older.</i>
	_____ <i>Signature Of Applicant</i>	_____ <i>Date</i> _____ <i>Initial</i>

MEMBER	Member Name: _____	Mailing Name: _____ <i>(optional)</i>
	Address: _____ <i>(optional)</i>	_____ City _____ State _____ Zip
	Email: _____	Phone: _____ <i>(optional)</i>
	_____ Birthday Month and Day: _____	_____
	_____	_____ <i>I am 18 years of age or older.</i>
	_____ <i>Signature Of Applicant</i>	_____ <i>Date</i> _____ <i>Initial</i>

Please enter amounts paid:	Individual	Couple
Membership through Feb 2012	\$37.50 _____	\$56.25 _____
Membership through Feb 2013	\$77.50 _____	\$121 _____
All donations will go towards RCG events, programs, and services.	Donation _____	Donation _____
	Total _____	Total _____

Please enclose check or money order payable to "River City Gems"

Or pay online with PayPal, Visa, Mastercard or Discover at www.rivercitygems.org/membership/

Mail completed application to: River City Gems, P.O. Box 601203, Sacramento, CA 95860