



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>Signature Of Applicant</i>	<i>Date</i>
	<i>I am 18 years of age or older.</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>Signature Of Applicant</i>	<i>Date</i>
	<i>I am 18 years of age or older.</i>	<i>Initial</i>

Please enter amounts paid:

	Individual	Couple
Membership through Feb 2011	\$50.00 _____	\$75.00 _____
Membership through Feb 2012	\$100.00 _____	\$150.00 _____
All donations will go toward RCG events, programs, and services.	Donation _____	Donation _____
	Total _____	_____

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

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

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