

Please print this page, complete it, and mail with your check for \$25 payable to AACB to address at bottom.

AACB MEMBERSHIP APPLICATION/RENEWAL **- Includes Spouse/Children Under 18 -**

First Name: _____

Last Name: _____

Address: _____

City: _____

State and ZIP: _____

Phone Number: _____

Email Address: _____

Membership: (Check One) New Member Renewing Member

Annual membership of \$25 is renewable January 1st each year.

AACB Forge You're a Member Of: _____

For Membership Directory purposes, may we include your contact information? Yes No

Liability Release Statement – Read and Initial Below:

I realize the potential hazards associated with the craft of blacksmithing and will not hold the Appalachian Area Chapter of Blacksmiths, its officers, demonstrators, or any member responsible or liable in the event of an accident or injury incurred during a chapter function, including but not limited to chapter meetings, classes, and demonstrations. I am aware of the requirement to wear safety glasses during all demonstrations and while working at chapter member forges. I am also aware of the danger of hearing damage due to the nature of the craft and accept responsibility of taking the necessary steps to protect my hearing. I further agree to inform any family members or guests that I may bring to a chapter function of these potential dangers and will advise them to take all necessary precautions.

>>> Entering my initials here _____ indicates I have read and understood the information provided above.

Mail with \$25 check payable to AACB to:

Jane Latsch
115 Johnny Clark Loop
Erin TN 37061