



Capital City Bears

2015 Membership Application



The Capital City Bears is a gay non-profit social organization with a charitable intent directed primarily towards bears and their admirers. Membership shall not be denied for reasons of race, creed, national origin, sexual orientation, sex or age.

Membership Type

Individual Membership - \$20

Individual Members are entitled to the following rights and privileges:

- attend all meetings and functions
- receive publications and regular mailings
- serve on the board of directors or act in any designated capacity on any committee or assigned position
- vote on all issues that require a vote of the general membership
- be listed in the membership directory
- nominate individuals to the executive committee.

Membership period runs from January 1 - December 31. Membership fees are not prorated if paid in the middle of the year.

Partner Membership - \$30
 each additional Partner (e.g. triad) -\$15

Partner Memberships are available to two or more active members in a domestic relationship. All members are entitled to the same rights and privileges as Individual Members except that they will receive one copy of publications. (CCB has the right to ask for proof of domestic relationship).

Associate Membership - \$20

Associate Memberships are available to those who do not wish to be full members of the Capital City Bears. Associate members are entitled to the same rights and privileges except they cannot vote, nominate members for elections, and serve on the Executive Committee.

IMPORTANT - PLEASE READ

I request and agree to membership in the Capital City Bears (CCB) and abide by the CCB Bylaws. I agree that the Capital City Bears, its officers, members, or any other entity will not be held legally, financially, or otherwise responsible, wholly or in part, for any acts made on my part at any CCB function, nor for any acts I may make in the name of the Capital City Bears without agreement of the Executive Committee of the Capital City Bears. I understand that all information provided on this application shall be kept by the Capital City Bears for its use only and will not be released to any outside parties. I hereby approve the inclusion of my images in any official CCB media and on the CCB website. By my signature, I confirm that I am 18 years of age or older.

Please Print Legibly.

NAME: _____ PARTNER NAME: _____

EMAIL: _____ EMAIL: _____

PHONE NUMBER _____ PHONE NUMBER: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ POSTAL CODE: _____

BIRTHDAY: ____/____/____ PARTNER BIRTHDAY: ____/____/____ ANNIVERSARY: ____/____/____

(Please attach info for additional partners (e.g. triad) on a second application. Attach all applications together and submit to the Capital City Bears.)

SIGNATURE: _____ SIGNATURE: _____

DATE: _____ DATE: _____

Please send this completed form and check payable to:

Capital City Bears
 PO Box 60703
 Harrisburg, PA 17106-0703

**Returned check charges apply

Questions?

Email us at
 info@capitalcitybears.com

Form Revision 08/2014

FOR CAPITAL CITY BEARS USE ONLY

Date Received: _____

Received By: _____

Check/Money Order #: _____

Amount Received: _____



Capital City Bears is a project of the Black and White Party, Inc.