

**Mount Diablo Metal Detecting Club
Membership Application**

Membership # _____

This will be your assigned membership number once your application is approved.

Membership Type: (check your preference below)

Single Membership \$24.00/year: _____

Family Membership \$30.00/year: _____

Date: _____

Name : _____

Address: _____

City: _____ State: _____

Zip code: _____

Cell Phone #: _____ Home Phone # _____

E-mail Address: _____

Owned Detector Type: _____

Would you like run for a club office?

Yes ___ No ___ Maybe ___

Dues paid for year (please check which year(s) you are paying for:

2022 ___ 2023 ___ 2024 ___ 2025 ___ 2026 ___ 2027 ___

2028 ___ 2029 ___ 2030 ___ 2031 ___ 2032 ___ 2033 ___

Please mail this completed application along with your check/money order to:

Mount Diablo Metal Detecting Club

C/O Ken Housfeld

900 Hamilton Drive

Pleasant Hill, CA 94523

Please allow 2 weeks for your application to be processed.