



Texas Mountaineers Membership Application

Email completed application to secretary@texasmountaineers.org,
and send payment through our PayPal link at <http://texasmountaineers.org/membership/>

Alternatively, you may mail a printed copy of this Application, the signed Release & Indemnity Agreement, and a check (see link above for appropriate amount). Email secretary@texasmountaineers.org for mailing address information.

| | |
|--------------------------------|---------------------|
| Name _____ | Date of Birth _____ |
| Address _____ | |
| City / State / ZIP Code _____ | |
| Email Address _____ | |
| Phone Number _____ | |
| Emergency Contact Name _____ | |
| Emergency Contact Number _____ | |

Have you climbed before? Yes No

If yes,

- 1) Where do you climb? _____
- 2) What gear do you own? _____
- 3) Is your gear marked? Yes No
 - a. If yes, what colors? _____
- 4) How frequently do you climb? _____
- 5) What types of climbing do you have experience in?

| | | |
|---------------------------------------|--|---------------------------------------|
| <input type="checkbox"/> Top roping | <input type="checkbox"/> Traditional lead climbing | <input type="checkbox"/> Ice climbing |
| <input type="checkbox"/> Bouldering | <input type="checkbox"/> Aid climbing | <input type="checkbox"/> Alpine |
| <input type="checkbox"/> Gym climbing | <input type="checkbox"/> Mountaineering | |
| <input type="checkbox"/> Other _____ | | |

List all formal instruction you have received as it pertains to climbing or mountaineering. Include all training that you have received in safety or first aid.

| Date | Course Name | Provider | Location |
|------|-------------|----------|----------|
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Where did you hear about the Texas Mountaineers? _____

What interests you about the club? _____