



HMGS EAST

Eastern Chapter Historical Miniatures Gaming Society

Tax ID # 52-1463458

4/25/2006

HMGS Membership Application

Please initiate/continue my membership in HMGS East. I am:

Name: _____

Address: _____

City: _____

State/Province: _____

Zip/Postal Code: _____

Country: _____

Phone Number: _____

E-mail Address: _____

Membership Number: _____
(if known)

Yes **No** Please share my name and address with other HMGS members.
(If un-marked your response will be considered to be **Yes**)

Yes **No** Please share my e-mail address with other HMGS members.
(If un-marked your response will be considered to be **Yes**)

Please check your method of payment:

My check for \$20.00 made out to "HMGS" is enclosed.

My credit card (VISA/MC/Discover **ONLY** please!) data is:

Credit Card Number: _____

Name as appears on Card: _____

Credit Card Expiration Date: _____

I authorize HMGS to charge my credit card \$20 in payment for my membership/renewal.

Signed: _____
(Signature) (Date)

Please mail completed form to:

**HMGS Secretary
c/o Bill Rutherford
5436 Lomax Way
Woodbridge, VA 22193**