



**Membership Application**  
**Albuquerque Coin Club**  
**PO Box 11602, Albuquerque, NM 87192**  
[www.albuquerquecoinclub.com](http://www.albuquerquecoinclub.com)

Date of application: (mm/dd/year) \_\_\_\_\_

2. Type of Membership: (check one) New membership\_\_\_\_ Renewal membership\_\_\_\_\_
3. If renewal, please provide your Club membership Number\_\_\_\_\_ (otherwise leave blank)
4. Name: (First)\_\_\_\_\_ (Last)\_\_\_\_\_
5. Date of Birth: (mm/dd/year)\_\_\_\_\_ E-Mail\_\_\_\_\_
6. Postal Mailing Address: \_\_\_\_\_ City:\_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone # \_\_\_\_\_
7. Are you an ANA (American Numismatic Association) Member Yes \_\_\_ No \_\_\_ # \_\_\_\_\_
8. Emergency Contact : Name (First and Last Name) \_\_\_\_\_
9. Emergency Contact Phone Number: \_\_\_\_\_

10. Type of Membership: (1,2, or 3 see below) \_\_\_\_\_(If #3 selected, provide family member Information below)

The annual membership dues shall be:

1. **Individual Member: \$20 per year** (January thru December)
2. **Young Numismatist (YNs): \$5 per year** (age 17 years old and younger) (Separate application for each YN applicant required, unless registering under Family Membership)
3. **Family Membership: \$25 per year for first two members and \$5 for each additional Member: Please check the box with the number of family members:**

**2 members = \$25  , 3 members = \$30  , 4 members = \$35  , 5 members = \$40**

( Note: Special rule apply for Adult family members- They must reside in the same home as primary member and are limited to a maximum of 3 adults. Elderly parents/grandparents may live separately, if primary member is responsible for their care. Contact ACC if more than 5 members).

Family Member Names (First and Last Nmaes), DOB and E-Mail Addresses, if available

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**Mail-in application and Payment: Mail payment with printed application to the:**

**Albuquerque Coin Club**

**PO Box 11602**

**Albuquerque, New Mexico 87192**

**Club use only**

Membership Number: \_\_\_\_\_ Membership Year: \_\_\_\_\_

Mailed to Member (Date): \_\_\_\_\_ Hand Delivered \_\_\_\_\_

Dues received by (Name): \_\_\_\_\_ Cash/Check/MO \_\_\_\_\_

Paid Online through STRIPE: Date Paid \_\_\_\_\_ Amount \_\_\_\_\_