

**International Depression Glass Club, Inc.
Membership application**



Name: _____

Mailing Address _____

City: _____

State: _____ Zip: _____

E-Mail: _____

Phone: _____

Collector, Dealer or both? _____

Special interest: _____

If you are a dealer, do you wish to be on the show waiting list?
(If yes, please complete dealer application)

If membership is accepted, what duties are you willing to share with the club?

- Help with show
- Help with Lobby/ Miscellaneous
- Share Expertise with IDGC members
- Other: _____

Recommended by:

- Name: _____ Phone _____
- Name: _____ Phone _____

Regular Member dues are \$25.00 per fiscal year. Regular members are required to help with the show and *must attend at least one (1) general membership meeting each year.*

Associate member dues are \$45.00 per fiscal year.

Dues are subject to change: On rare occasions, special assessments may be required of the membership in accordance with the Bylaws.

I am applying for:

_____ Regular Membership _____ Associate Membership

Enclose a check payable to **IDGC** and send to:

- Barb Olesen, Secretary
- PO Box 1300
- Penn Valley, CA 95946