

# CROFT MEMBERSHIP APPLICATION

*Celtic Reenactment Organization for Fellowship and Trade*

Website: croft\_az.org / Email: croft\_az@outlook.com / Address: PO Box 27752, Tempe, AZ 85285-7752

Please fill out the form below and forward your membership dues per chosen payment method along with a copy of your completed membership form. Please READ and FOLLOW the INSTRUCTIONS below.

***NOTE: ZELLE is the preferred payment method and using the ONLINE GOOGLE FORM is preferred. Using these methods are quicker and more secure. These preferred methods afford the membership administrator to handle everything electronically. They can copy and paste data into our administrative membership list and member contact list. Handwritten forms require extra work for our membership and typos are possible due to deciphering illegible handwriting or potential mistakes made while typing.***

## PAYMENT METHODS

**Zelle:** (Use the [ONLINE GOOGLE FORM](#))

It is best to setup Zelle directly through your online banking site and not the mobile app.

- Use *croft\_az@outlook.com* to search for our *New Recipient/Send To* account name. You will see our formal account name displays as *CELTIC REENACTMENT ORGANIZATION FOR*.
- In the Zelle notation, input the name(s) the membership dues cover.
- Email your completed PDF form to *croft\_az@outlook.com*. Instructions to PDF are included in the online form.

## Check:

- Print page 2 of this form, legibly fill out the form, and send form with check to:  
CROFT  
PO Box 27752,  
Tempe AZ 85285-7752.

**Cash:** Do not send cash by mail. Cash is not a preferred method.

- Attend a monthly meeting and hand cash and completed form to the current Treasurer.

Please write legibly.

*Form is on next page.*

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### CONTACT INFO

Name(s): \_\_\_\_\_

*Names if in the same residence.*

Address: \_\_\_\_\_

Email: \_\_\_\_\_

*If a household, input additional emails for those wishing to receive CROFT Communications.*

Phone: \_\_\_\_\_

*If a household, input individual phone numbers so others can call you directly regarding club activities, projects, and events.*

### MEMBERSHIP DUES

Dues are payable upon joining and are renewable on January 1st each year. Dues are prorated for new members joining after July 1st at one-half the amount. Please acknowledge below by indicating your payment option.

\$15 Individual Adult

\$25 Family (immediate household only)

\$10 Associate

Minor w/Adult Sponsor

If choosing the \$10 Sponsor option, please include the sponsor's name: \_\_\_\_\_

### PAYMENT METHOD

Zelle

Check

Cash

### INTERESTS

Please list any crafts or trades in which you are skilled or interested. If you are joining as a family, please list each family member and their crafts or trades of choice.

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Do you wish to become an active member or a supporting friend of CROFT?

- **Active Member:** I wish to participate in monthly gatherings as well as possible participation at scheduled events.
- **Friend of CROFT:** I do not wish to participate, but would like to support CROFT. Donation will be applied to administrative costs, building materials for Thistlewood Croft site, and audience participation projects.

### OATH OF APPLICATION

Please read carefully and sign. Your signature below is equivalent to signing as a sole individual or on behalf of members within your residence.

*I do solemnly affirm that I understand membership in the Celtic Re-enactment Organization for Fellowship and Trades (CROFT) is on a one-year basis subject to annual renewal by CROFT and its Board of Directors (Elders). I understand that only Elders are authorized to obligate funds, equipment, or services of CROFT. I understand that CROFT is not liable for loss or damage to my personal property when operated for or by CROFT. I voluntarily subscribe to the objectives and purposes of CROFT and agree to be guided by the CROFT Rules and Bylaws, to comply with CROFT policies as they are set forth, subject to amendment. I agree to abide by the decisions of the Elders or the membership (where applicable). I certify that all information on this application is presently correct and any false statement may be cause to deny membership. I understand that this Oath of Application is part of the application for CROFT membership and my digital signature on this form constitutes evidence of that understanding.*

Sign your full first and last name below to e-sign this document and agree to the terms on behalf of yourself or on behalf of members within your residence.

Member Signature: \_\_\_\_\_