



Tiger Mountain Family Nudist Park

A Trade Name of Fraternity Snoqualmie, Inc.
 PO Box 748 Issaquah WA 98027
 425-392-NUDE

2020 MEMBERSHIP RENEWAL APPLICATION

Instructions:

- Complete this form, indicating membership class where appropriate. Don't forget to sign!
- All lines of the application and background check must be filled out completely and legibly or your application will not be processed.
- We update members through Facebook and email. Visit us at www.facebook.com/TMFNP
- Please check the opt out box if you do not wish to receive park updates via email.
- D.A.M. passes are available, or consider donating to the project of your choice!
- Make checks payable to: Tiger Mountain Family Nudist Park
- Couples may use the same form if your address is the same. Don't forget to sign the back!

Membership includes emailed newsletter and members only access to website.
 Valid email address required for newsletter and access to members only area.

Member 1 Name _____ Birthdate _____

AANR Membership Single * ‡ AANR/AANR NW # _____ \$ 64
 AANR Membership Couple* ‡ AANR/AANR NW # _____ \$ 113
 Life Membership by application per bylaws, full access, no fees ‡ \$ 0
 Regular Membership, full access, no day fees ‡ \$ 300
 Don't Ask Me pass \$ 200

Member 2 Name _____ Birthdate _____

AANR Membership Single* ‡ (only if not renewing as couple above) \$ 64
 AANR/AANR NW # _____
 Life Membership by application per bylaws, full access, no fees ‡ \$ 0
 Regular Membership, full access, no day fees ‡ \$ 300
 Don't Ask Me pass \$ 200

Additional Park Donation - your donation is greatly appreciated. \$ _____

Please submit payment by May 1 to avoid grounds fees! TOTAL \$ _____

* AANR membership (American Association for Nude Recreation) Includes AANR Bulletin, national membership and discounts at most clubs. Tiger Mountain Family Nudist Park's discounted day fees are \$17 per adult.
 ‡ Children of member(s) are included in membership fees to age 18.

Child name _____ Birthdate _____

Child name _____ Birthdate _____

Child name _____ Birthdate _____

Child name _____ Birthdate _____

OFFICE USE

Received by _____

Date _____

Watch Date. _____

No. 1 CARD # _____

AANR# _____

No. 2 CARD # _____

AANR# _____

Process Date _____

Card(s) Sent _____

Entered Date _____

Entered By _____

All Applications are processed through:
Request for Criminal History Information and Child/Adult Abuse Information Act
Washington State Patrol | RCW 43.43.830 to 43.43.845

Address:

Street	Apt/Unit #
City	State
Zip Code	

Member #1 details:

Last	First	Date of Birth
Driver License #	State Issued	Expires
Cell Phone #	Email Address	<input type="checkbox"/> opt out of event emails

Member 1 Signature	Date
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Member #2 details:

Last	First	Date of Birth
Driver License #	State Issued	Expires
Cell Phone #	Email Address	<input type="checkbox"/> opt out of event emails

Member 2 Signature	Date
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Volunteers keep this park running year round. Please indicate areas where you can help, or write in your area of expertise! We're always looking for an extra helping hand, especially on event days and offseason.

<input type="checkbox"/> Painting	<input type="checkbox"/> Event Help	<input type="checkbox"/> Kitchen
<input type="checkbox"/> Plumbing	<input type="checkbox"/> Pool/Hot Tub care	<input type="checkbox"/> Carpentry/building
<input type="checkbox"/> Electrical	<input type="checkbox"/> Invasive Species Removal	<input type="checkbox"/> Hospitality
<input type="checkbox"/> Park Beautification	<input type="checkbox"/> Youth Activities	Other: _____
<input type="checkbox"/> Trail Maintenance	<input type="checkbox"/> Nudestock StageHand	

New Referral program coming soon!
Save on your 2021 membership by referring friends to become members.