

**MEMBERSHIP
APPLICATION****Office Use Only
JRCS# _____**

Type or Print

Name _____

(Last Name)

(First Name)

(Middle Initial)

Address _____

(Street Address)

Date of Birth _____

(Month Day Year)

(Apt / Suite / Other)

Email _____

(City)

(State)

(ZIP Code)

Phone (_____) _____

The purpose of the John Reich Collectors Society (JRCS) is to encourage the study of numismatics, particularly United States silver and gold coins minted before the introduction of the Seated Liberty design, and to provide technical and educational information concerning such coins. A member's name and address will not be included in any membership directory issued by JRCS or be disclosed to others without prior consent of such member.

Check the appropriate space below:

 Collector Collector/Dealer Dealer (Firm Name) _____

Indicate your area(s) of interest in Early United States Coins:

<input type="checkbox"/> a. Flowing Hair Bust Half Dimes	<input type="checkbox"/> h. Capped Bust Quarter Dollars
<input type="checkbox"/> b. Draped Bust Half Dimes	<input type="checkbox"/> i. Flowing Hair Bust Half Dollars
<input type="checkbox"/> c. Capped Bust Half Dimes	<input type="checkbox"/> j. Draped Bust Half Dollars
<input type="checkbox"/> d. Draped Bust Small Eagle Dimes	<input type="checkbox"/> k. Capped Bust Half Dollars
<input type="checkbox"/> e. Draped Bust Heraldic Eagle Dimes	<input type="checkbox"/> l. Flowing Hair Bust Dollars
<input type="checkbox"/> f. Capped Bust Dimes	<input type="checkbox"/> m. Draped Bust Dollars
<input type="checkbox"/> g. Draped Bust Quarter Dollars	<input type="checkbox"/> n. Gold Issues

Guarantee (if Applicant is under 21 years):

I guarantee payment by the Applicant of his/her debts or other obligations to JRCS or any of its members. I am 21 years or older.

(Signature of Guarantor)

Relation to Applicant _____

Applicant's Agreement:

I hereby apply for membership, and agree to uphold the By-Laws of JRCS. As required by the By-Laws of JRCS, I agree to pay promptly all my debts other obligations to JRCS or any of its members. I enclose a check or money order for \$30.00 payable to John Reich Collectors Society for my annual membership contribution, or \$750.00 for a life membership in the Society.

(Date) _____

(Signature of Applicant) _____

If applying for reinstatement, please give your former JRCS member # _____

John Reich Collectors Society (Employer Identification No. 41-3515578) is exempt from Federal income tax under Section 501(c)(3) of the Internal Revenue Code. As such, gifts and contributions made to John Reich Collectors Society may be deducted as provided in the Internal Revenue Code.

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