

Heartland Naturists of Kansas City Membership Application

Primary Member

First Name: _____ Last Name: _____

Spouse / Significant Other

First Name: _____ Last Name: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Primary Phone: () _____ Secondary Phone: () _____

Primary Birthdate: ___/___/___ Spouse/SO Birthdate: ___/___/___

E-mail Address: _____

Alternate E-mail: _____

Current memberships that you hold (Circle all that apply): AANR TNS CFI OTHER: _____

Please list any clubs or resorts you have been a member of or visited. If you have not been to a club or resort, please explain your experience with nudism and why you want to join the Heartland Naturists.

Please circle the membership type you are applying for: **FULL SWIM TRIAL**

Full Member only, circle any discount you wish to apply for (Only one):

- YOUTH (age 18-25)
- STUDENT :(full-time, 13 hours)
- DISTANCE (75 miles or more)
- SENIOR (age 65 or greater)

Do you wish to add The Naturist Society membership for \$55: YES NO

By submitting this application for membership, you assert that you:

- Have never been convicted of any sex offense
- Have never been convicted of any violent crime
- Grant the Heartland Naturists permission to execute a background check on anyone being submitted for membership
- Understand that the Heartland Naturists is a family-friendly naturist organization and is not a swinger, singles, or dating group
- Have read, understand, and agree to abide by the Guidelines of Behavior

Primary Signature: _____ Date: ___/___/___

Spouse/SO Signature: _____ Date: ___/___/___

Heartland Naturists * Box 9103 * Shawnee Mission, KS 66201