



Club Hosting Information

Name(s): _____
 First Middle Initial Last

Address: _____ Home Phone Number
 _____ (____)_____-_____
 _____ Mobile Phone Number
 _____ (____)_____-_____

Email Address: _____ Forum Handle _____

Date open for club meeting __/__/__ Secondary Date __/__/__

Subject or Agenda Input _____

Kid Friendly (Please circle one) Yes or No

Limit meeting size (Please circle one) Yes or No. If yes, please provide input. _____

RSVP (Please circle one) Yes or No.

Snacks and Drink information. _____

Please indicate any additional information you feel we need to know.

The information contained within this document is privileged and private between Northeast Florida Marine Aquarium Society (to be identified further as NFMAS) and the Applicant mentioned above. Information contained within this document will not be given to any third party in any way or by any means whatsoever without the express written permission of the applicant, unless circumstances arise that it is a legal requirement to do so, and under these circumstances the applicant or the applicant's parent or guardian if under the age of 18 yrs will be notified accordingly.