



Dayton Warm Breezes Naturists Club

Membership Application

Date: _____

Man's Name _____

Woman's Name _____

Street _____

City _____ State _____ Zip _____

Telephone # - home: _____

His cell: _____ Her cell: _____

email address, his _____

email address, hers _____

Date of birth, his _____ Date of birth, hers _____

Children who will be involved in club activities, names and ages: _____

Member AANR? him Y N P #: _____

Member AANR? her Y N P #: _____

OK to release name publically? him Y N, her Y N

If joining as a single, are you married? Y N

(Note, this form is designed for the majority of couples who will be joining. Please modify the form as necessary.)

Nudist Principles

We recognize the essential wholesomeness of the human body and that life is enhanced by the naturalness of social nudity. From exercise to relaxation, physical health and mental well being are enriched through social nude recreation. We have the right to practice social nudity in appropriate settings, provided we do not infringe on the rights of others.

I have read the principles as printed above and accept them for myself and on behalf of my immediate household. I hereby make application to be accepted as a member of Dayton Warm Breezes Naturist Club.

I agree, if accepted, to pay my dues annually or as otherwise required. I agree that if club management deems it necessary that in the best interest of the club, my membership may be cancelled for cause. I shall abide by their decision. I personally vouch for the truthfulness of the information supplied on this application. In the event of any losses sustained by me or by members of my family as a result of my membership therein, I agree to hold harmless and wholly non-liable the club and the officers thereof.

Signed: Man _____

Signed: Woman _____