

Tennessee Central Basin Grotto Membership Form

Renewal ___ New Member ___ Date _____ Dues Paid \$_____ for _____(year)

Name _____
Address _____

Phone # _____ (home)
_____ (work)
_____ (cell)

Email addresses _____ (primary)
_____ (secondary)

If you are a member of the NSS, please give your number _____

Other grotto affiliations _____

Is the Tennessee Central Basin Grotto your primary grotto? Yes ___ No ___

Do you wish to be on the TCBG rescue call out list?
(note: if you are called; do not show up and expect to do nothing) Yes ___ No ___

List NCRC training you have: _____

List First Aid training you have: _____

List any other specialized training you have that would aid in an emergency situation:

How long have you been caving? _____

What types of trips do you prefer? (vertical, horizontal, survey etc.) _____

What other hobbies are you interested in?

Do you have any medical or physical conditions that other cavers would need to know in an emergency situation? (This is STRICTLY voluntary information.)

Please bring this form, the waiver form and dues to the Grotto Meeting or
mail to: Tennessee Central Basin Grotto
P.O. Box 19
Christiana, TN 37037