

# Coyle Field Astronomers Membership Application

Please Print Clearly

## Applicant Information

Full Name: \_\_\_\_\_  
Last First

Address: \_\_\_\_\_  
Street Address Apartment/Unit #

\_\_\_\_\_ City State ZIP Code

Website Login \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Email: \_\_\_\_\_ Age: \_\_\_\_\_ Date: \_\_\_\_\_

## Voluntary Information

### Equipment Owned

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

### Tell Us About Yourself

- What other Astronomy club affiliations do you have? (if none leave blank)

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- Which best describes your interests in Astronomy? (circle all that apply)

Beginner - Casual Observer - Avid Observer - Casual Imaging - Advanced Imaging

- What made you decide to join our club?

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- Do you have any interest in, or experience with public outreach?

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*\*\*Please remember to include a signed and dated copy of our rules and waiver form(s). Your membership/Field Use License will not be issued without these documents attached with this application!*

*Completed forms and application should be mailed to CFA's mailing address listed below. If you were not able to pay your annual membership fees via PayPal on our website, please include a check or M.O. made payable to Coyle Field Astronomers, for the current annual amount listed on the website.*

**Coyle Field Astronomers  
P.O. Box 302  
Riverside, NJ 08075**