

Eureka! Treasure Hunters Club, Inc.

P.O. BOX 101385, DENVER, COLORADO 80250-1385

<http://www.EurekaTHC.org> eureka.eurekaweb@gmail.com

Year 2026 Membership Registration Form

Please join or renew by using this form. It will make our record keeping much easier.

LAST NAME _____ FIRST NAME _____

ADDRESS _____

CITY, ST ZIP+4 _____

HOME PHONE (____) _____ WORK PHONE (____) _____ CELL (____) _____

E-MAIL _____

ENTER NAMES FOR FAMILY MEMBERS (must reside in the same household):
_____|_____|_____

PLEASE CHECK APPLICABLE BOX: SINGLE MEMBERSHIP (\$48) NEW MEMBER
 FAMILY MEMBERSHIP (\$60) RENEWAL

Yearly Membership runs from May through April – new members joining after April 30 will pay prorated dues at \$4 per month single / \$5 per month family membership for their first year only. **A \$5 additional fee will be added to any renewal(s) paid after April 30.**

MOST MEMBERS' NAMES AND PHONE NUMBERS ARE INCLUDED IN OUR MEMBERSHIP DIRECTORY. IF YOU PREFER NOT TO BE LISTED, PLEASE INDICATE THAT PREFERENCE BELOW. IN EITHER CASE, YOUR PHONE NUMBER WILL BE AVAILABLE TO THE EUREKA BOARD AND COMMITTEE COORDINATORS BUT YOUR INFORMATION WILL NOT BE SOLD OR GIVEN TO ANYONE OUTSIDE THE CLUB.

PLEASE DO NOT LIST

IF YOU ARE A NEW MEMBER, PLEASE TELL US HOW YOU FOUND OUT ABOUT EUREKA! _____

In return for participating in any activities, events, hunts or meetings ("Activities") of the Eureka! Treasure Hunters Club ("Eureka"), I release and indemnify Eureka, its officers, directors, volunteers, agents and landowners ("Released Parties") from and against any and all claims, demands or assertions of liabilities which I might make, including claims of negligence, arising from, or based in whole or in part on, my participation in Activities and from any other act or omission of the Released Parties ("All Claims"). Likewise, if I am a spouse, parent or guardian of a participant in any Activities, or if I bring any other participant, I release and indemnify the Released Parties from and against All Claims made by or on behalf of such participants. On behalf of myself and such participants, I authorize Eureka and the Released Parties to photograph or film us and consent to the use of our photos, images or likeness in any and all publications. This entire release, waiver and indemnification is intended to be as broad as permitted by law. I have received a copy of the Bylaws and of the Treasure Hunters Code of Ethics (both noted at EurekaTHC.org) of the Eureka! Treasure Hunter's Club, Inc. and agree that I and anyone included on this membership form will respect and abide by these bylaws as a condition of membership.

SIGNATURE _____ DATE _____

SIGNATURE (spouse/significant other/family member): _____ DATE _____

FOR CLUB USE ONLY: \$\$ RECEIVED _____ DATE RECEIVED _____ CASH _____ CHECK NO. _____

MEMBERSHIP EXPIRATION DATE _____ RECEIVED BY (INITIALS) _____ Feb 2026

Receipt for membership 2026 amount paid _____ [] cash [] ck # _____
Received by _____ Date _____