



Laurentian Chapter of the Adirondack Mountain Club

Complimentary Membership Application

Applicant Information

Full Name: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ *City State/Province/Region ZIP/Postal Code*

_____ *Country*

I am at least 18 years old. YES NO

Can you provide proof of COVID vaccination? YES NO

Phone: _____

Email: _____

Experience and Interests

What Chapter activities would you be interested in participating, or what skills do you have to offer? Complimentary members are required to complete a minimum of ONE activity from each of the two menus below. Check ALL activities that you might be interested in. If you are awarded a complimentary membership, you can work with your mentor to pick ONE from each menu to complete your obligation.

MENU ONE:

- ___ Attend an annual meeting / potluck and assist with event logistics (set up-breakdown)
- ___ Attend one outing as a participant while shadowing the Trip Leader and glean leadership skill
- ___ Attend a Chapter Leadership Training Workshop

MENU TWO:

- ___ Volunteer for one day of Laurentian Chapter sponsored trail work.
- ___ Lead or co-lead one Chapter outing (difficulty levels 1-3 only).
Complimentary members may lead an outing if they have completed the Laurentian Chapter Leadership Training Workshop, otherwise complimentary members may co-lead an outing with an established Chapter leader if the Leadership Training Workshop has not been completed.
- ___ Serve in an officer or appointed position capacity (e.g. Hospitality, Secretary, or other position) for one year
- ___ Present at one Outdoors-Indoors event
- ___ Plan and present a workshop or educational event (Adirondack or nature theme)
- ___ Other proposals considered with approval by the Executive Board

Alternatively, tell us about other possible activities or ideas you have that might be useful to the Chapter:

Brief Essay

Tell us about yourself in 100 words or less: Why do you want to serve in the Laurentian Chapter? What experience do you have (e.g. hiking, snowshoeing, backpacking, camping, skiing, etc.)?

Signature: _____ Date: _____

Submit Application

Submit the completed application form to:

Blair Madore
Vice Chair, Education
19 1/2 Cherry St.
Potsdam, New York 13676