



# Turning Circle Membership Form

An Eclectic Pagan  
Fellowship

[www.turningcircle.org](http://www.turningcircle.org)

Legal Name \_\_\_\_\_ Date: \_\_\_\_\_

Pagan Name \_\_\_\_\_

Street  
Address

Phone (s) \_\_\_\_\_

Email \_\_\_\_\_ Facebook \_\_\_\_\_

Emergency Name \_\_\_\_\_

Contact Relationship \_\_\_\_\_ Phone # \_\_\_\_\_

Health  
And  
Allergy  
Concerns

Share Info\*?  YES  NO  Share Name/Email Only

Under 18?  YES  NO Guardian Signature  
if YES \_\_\_\_\_

Signature \_\_\_\_\_

*\*All info is for TC members only. Restricted info will be shared with UUCC staff and TC officers only*