

**APPLICATION FOR MEMBERSHIP
YOUNG MEMBER PROGRAM**

NAME

The Society of American Magicians

**An International Association
Organized May 10th, 1902
Incorporated April 3rd, 1908**



National Council

Magic — Unity — Might

COMPLETE THE APPLICATION ON REVERSE SIDE.
MAIL APPLICATION AND FEE IN U.S. FUNDS (CHECK OR MONEY ORDER)

TO: Richard Blowers
National Administrator
P. O. Box 510260
St. Louis, MO 63151

Membership Number

Young Member at Large Assembly Number

I consent to my child giving this personal information to the Society of American Magicians. Signed _____

APPLICANT'S BACKGROUND

(Please Print)

Full Name _____

Address _____

City and State _____ Zip _____

Phone _____ Sex _____

Date of Birth ____/____/____ Place _____
Month-Day-Year (County)

Professional Name _____

PLEDGE

I promise to do my best to improve the Art of Magic and to follow the rules of the Society of Young Magicians.

I agree not to tell any of the secrets of magic to anyone who is not a magician, and to try to discourage others from telling these secrets.

I will be honest and fair as a magician, and try to cooperate with others who are interested in magic.

I agree to help other magicians in any way that I can. I will encourage them to perfect our art. I will not make fun of or ridicule the efforts of any magician.

I will strive to use magic in a positive way for my personal enjoyment and for the amazement and enjoyment of my family, friends, and others.

Signed in Honor _____ Date _____

Fees \$15.00 Annual Dues plus \$5.00 Initiation Fee. Members living outside USA, Canada, or Mexico, add \$10.00 for postage surcharge.