



Investment Club Members' Data Form

Name: _____ Date: _____ Choose one: I am an adult (18 over)

Name Your Investment Club: _____

Email: _____ Email 2: _____

Mobile Phone Number: _____ Other Phone Number: _____

Address: _____

City: _____ State: _____ Zip: _____

Youth Members are **required** to include the contact information and signature of a parent or guardian

Name of Parent or Guardian: _____

Email of Parent or Guardian: _____ Email 2: _____

Parent's Mobile Phone Number: _____ Other Phone Number: _____

Address of Parent / Guardian if different from the youth: _____

City: _____ State: _____ Zip: _____

I understand and approve of my child joining the _____ investment club and that my child will abide by all of the rules and expectations of the club.

Signature of Parent or Guardian

Date

Return this completed form to the treasurer or president of your investment club.