

# Rock Lodge Club

P.O. Box 86 • Stockholm, NJ • 07460 • (973) 697-9721

## QUESTIONNAIRE FOR VISITORS AND POTENTIAL MEMBERS

**Please fill out and return this form. All information will be held in strict confidence.  
(You can type directly into this document! If completing by hand, PLEASE PRINT CLEARLY)**

1. Full Name \_\_\_\_\_ Age \_\_\_\_\_

Spouse/Partner's Name \_\_\_\_\_ Age \_\_\_\_\_

2. Home Address \_\_\_\_\_

Zip Code \_\_\_\_\_

3. Telephone # ( \_\_\_\_ ) \_\_\_\_\_ Email \_\_\_\_\_ @ \_\_\_\_\_

4. Driver's License # \_\_\_\_\_ Issuing State \_\_\_\_\_

5. First Names and ages of children (month, day & year of birth) \_\_\_\_\_

6. Occupations (You) \_\_\_\_\_ (Spouse/Partner) \_\_\_\_\_

7. How did you hear of Rock Lodge? Please select all that apply:

Friend	Relative	Our Website	Wikipedia	Web Search	TNS
AANR Web Site	AANR Bulletin	Other Publication	Other: _____		

8. List any other nudist clubs to which you have belonged or visited \_\_\_\_\_

9. If you have visited Rock Lodge before, please state when \_\_\_\_\_

10. List any past or present Rock Lodge members that you know \_\_\_\_\_

11. List any sports or other interests that you may have \_\_\_\_\_

Are you a member of AANR (American Association of Nude Recreation)?	Yes	No
Are you a member of the Naturist Society?	Yes	No
May we contact you with an online survey about your Rock Lodge visit?	Yes	No

I, the undersigned, understand that Rock Lodge Club is a cooperative, non-profit organization and waive all rights to claim damages, etc. in case of accident, injury or loss to myself or my family.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please complete this form, print it, sign it, and bring it with you when you come to visit.