

2026 Reenactment Guild of America Membership Application

Name: _____ Alias: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Group Associations (if any): _____

My Interests (check as many as you like):

Old West Performances Historical Portrayals/Living Histories Encampments Other (specify): _____

Check:

My information can be shared within the organization to keep me informed about RGA

Please do not share, except with the National office and my State Director

I, the undersigned, state that I verify that all names and information I have given on this Membership form is truthful, and that as a member of Reenactment Guild of America (RGA), I have read and will follow all RGA Safety Rules, Bylaws and other rules and guidelines posted at www.rgaamerica.com whenever representing myself as an RGA member and using the organization's insurance. Failure to comply could result in loss of membership and forfeiture of all member's benefits if so determined by the RGA Board of Directors.

Signature: _____ Date: _____

If under 18, Legal Guardian Signature: _____

Relationship: _____ Date: _____

New Application (send full length photo in period correct clothing with application for approval)

NOTE: until a full length photo showing period correct clothing is received, your membership will not be approved and you will not be covered by RGA's insurance policy. You will receive a refund if not approved.

Renewal RGA # _____ (send photo in period correct clothing for card, does not need to be full length). If no picture is included, your old one will be used.

Membership Fees:

\$45 for adults \$25 if under 18 years of age (\$45 upon completion of RGA Youth Program) Age of Youth: _____

*Membership discount is available for new members only when applying after Sept. 1, from date paid to end of that year, FIRST YEAR ONLY! Annual dues go from January 1-December 31 each year with no prorated discount after your first year. Email rgamembership@outlook.com for info.

You will get 1 free full color decal. Additional decals: _____ x \$5 each = \$ _____, includes shipping.

Send application, photo and fees (make check payable to RGA) to: Kim Bundy
RGA Membership Officer
4108 FM 230
Lovelady, TX 75851

