



FLORIDA SPELEOLOGICAL SOCIETY
Application for Membership and Membership Renewal.

As a member of the Florida Speleological Society, I agree to:

1. Follow Safety Practices
Use appropriate gear, respect established routes, and adhere to buddy system guidelines.
2. Practice Environmental Stewardship
Follow Leave No Trace principles, minimizing impact, respecting formations, and avoiding waste.
3. Respect Access and Land Use
Recognize cave access as a privilege, following all guidelines set by property owners.
4. Uphold Our Code of Conduct
Treat fellow members, guests, and the public with respect and encourage a positive community.
5. Comply with Society Policies
I understand that non-compliance may result in the loss of membership.

Name: _____ Phone: _____

Address: _____
(City) (State) (Zip)

Email: _____

(Florida Speleological Society will send club communications via email.)

Emergency Contact Name: _____ E.C. Phone: _____

Additional family members:

Name 1: _____ Phone 1: _____

Email 1: _____

Name 2: _____ Phone 2: _____

Email 2: _____

Signature: _____	Date: _____
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Please select payment method below:

I will pay by mail.

Florida Speleological Society
c/o Jerry Johnson
7130 NE 150th Ave Williston,
FL 32696-4954

I will pay electronically via PayPal.

Go to: <https://www.floridacaving.com/fss-membership/>