



SCONY Membership Application

Please print, complete form, make check payable to SCONY, and mail both to:

SCONY
P.O. Box 660008
Utopia Station
Queens, NY 11366

Annual Dues: \$30 for females, \$50 for males, \$40 for couples

Scene Info:

Scene Name: _____ Male _____ Female _____
Top _____ Bottom _____ Switch _____
Closest age: 20s ___ 30s ___ 40s ___ 50s ___ 60s ___

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Top _____ Bottom _____ Switch _____
Closest age: 20s ___ 30s ___ 40s ___ 50s ___ 60s ___

Contact Info:

Name: _____
Address: _____
_____ Phone: _____
_____ Email: _____
City State Zip Code

Personal Interests:

What name(s) would you like on your membership card(s)?

Since there is more to life than spanking, and we have some musicians in the group ...

Are you proficient at a musical instrument? _____
What instrument: _____
Vocal? _____
Style: _____

What performing skills could you contribute (other than spanking) at a gathering?

Are you a "scene-friendly" professional (i.e., therapist, accountant, doctor, etc.) who would like to offer your services upon a discreet and private recommendation? _____

Please briefly describe the genesis of your interest in spanking. (How old were you when you became interested; what is your experience so far; etc.):

We encourage your questions, comments and suggestions.
