



Application for Membership

Name : _____

Sponsor : _____

Address: _____

Town: _____

Phone: _____

e-Mail: _____

Date: _____

Annual hours you will commit to Club charity: _____

Will you chair or participate in fundraising event
once a year: _____

Approval Signatures

Sponsor 1: _____

Member 2: _____

Member 3: _____

Member 4: _____

Trustee 1: _____

Trustee 2: _____

Trustee 3: _____

Voting Results

Approved or Deferred: _____

Date: _____

Form of Payment: _____ Amt.Paid. _____ Accepted by: _____