



# JUNIOR LEAGUE OF MACON

## Application for Admission

DUE BY MAY 31

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Employment: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Spouse's Name (if applicable): \_\_\_\_\_

Length of residence in the Macon area as of May 1: \_\_\_\_\_

What do you hope to gain from your membership in the Junior League of Macon? \_\_\_\_\_

\_\_\_\_\_

Please describe any areas of special interest, personal skills, community connections, and/or professional expertise that you can contribute to the ongoing efforts of the League. \_\_\_\_\_

\_\_\_\_\_

How did you find out about the Junior League of Macon? If it was through a current member, please list her name. \_\_\_\_\_

Form may be emailed to [jlmaconadmissions@gmail.com](mailto:jlmaconadmissions@gmail.com) or mailed to:

The Junior League of Macon, Inc.  
Attn: Admissions Chair  
2055 Vineville Avenue  
Macon, GA 31204

**Please note: You will receive a letter of intent packet during the first week of June. This packet must be returned by June 30.**