



Thoroughbred Chapter
Membership Request Application

Name: _____ DOB: _____

Address: _____

City: _____ State: _____ Zip: _____

Cell: _____ Home: _____

Email: _____

Date of Commission: _____ Governor: _____

Are you a member of any other KY Colonels Chapter(s)? Yes No

If so, which one(s)?

Are you interested in serving on the Board? Yes No Maybe

Are you interested in serving on a committee? Yes No Maybe

Do you have any specific talents or abilities that can help the Chapter? Yes No

If so, what are they?

Do you belong to any other organizations, clubs, fraternal groups? Yes No

If so, which? _____

Military Service? Yes No Veteran Active Reserves Combat

Branch? _____

What information are you willing to share with other Colonels in this chapter on a distribution list? Name, email, other? If other, please be specific:

Is there any additional information or other you wish to add?

Might you know of other Colonels which may be interested in hearing about or from this Chapter? If yes, do you have an email address to share or other?

Signed:

Date:

Download and enter your information into the fields. Save and return the complete form with a copy of your current year HOKC membership card by email to:

kycolonelslexky@outlook.com

To print and mail by USPS: Thoroughbred Chapter of HOKC, Inc
P.O. Box 55363

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