**Churchill Society of Tennessee**



**APPLICATION FORM FOR MEMBERSHIP**

Please complete this sheet and return to by mail, along with a check for $25 for Annual dues. You will subsequently receive a formal letter of welcome and a membership card.

**Name: First, Last**

**Prefix (Mr. Mrs. MS. Dr. Lord)**

**Preferred name (This is for the Name Tag)**

**Name of Spouse or Significant other, including preferred name for the Name Tag**

**Mailing Address:**

**Telephone Numbers: Mobile, Fax and Other. (e.g. Home)**

**Mobile Fax Other**

**e-Mail address (preferred)**

**Are you a Churchill Centre member? YES or NO**

**Mail with a $25 check made payable to CSOT and return to:**

Membership Secretary

The Churchill Society of Tennessee,

2009 Overhill Drive

Nashville, TN 37215-3414