



## APPLICATION FOR MEMBERSHIP

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Home phone \_\_\_\_\_ Work phone \_\_\_\_\_

Fax # \_\_\_\_\_ E-mail address \_\_\_\_\_

Date of birth \_\_\_\_\_ Spouse's name \_\_\_\_\_

Employer \_\_\_\_\_ Title \_\_\_\_\_

Referred by \_\_\_\_\_

I would like to refer \_\_\_\_\_ Phone \_\_\_\_\_

### I AM INTERESTED IN THE FOLLOWING:

- |   |  |
|---|--|
| <input type="checkbox"/> Social Issues          | <input type="checkbox"/> Professional Development  |
| <input type="checkbox"/> Environmental Issues   | <input type="checkbox"/> Family & Youth Activities |
| <input type="checkbox"/> Personal Development   | <input type="checkbox"/> Sporting Activities       |
| <input type="checkbox"/> Community Involvement  | <input type="checkbox"/> Business Networking       |
| <input type="checkbox"/> Meeting New People     | <input type="checkbox"/> International Affairs     |
| <input type="checkbox"/> Governmental Affairs   | <input type="checkbox"/> Other _____               |
| <input type="checkbox"/> Social Security Reform | _____  |
| <input type="checkbox"/> Medicare Reform        | _____  |

Dues for your Jaycee membership are NOT tax deductible as a charitable contribution.