



2017 Membership Form

Type or Print Clearly in ink

Do Not Abbreviate City, County, or State Street Names

Date _____ Current Member ID# _____

First Name _____ M.I. _____ Last Name _____

Mailing Address _____

City _____ State _____ Zip Code +4 _____

Phone No. _____ Cell Phone No _____

Email _____ County of Residence _____

Club Name _____ Club County _____

Family Membership: (Please list) Spouse Name _____

Dependent Child(ren) _____

Dues	Individual	Family	Senior (80+ years)	Youth Under 18		<u>Kansas Information</u>
National	\$20.00	\$30.00	\$16.50	\$5.00		Area (Circle One) NE NW SC SE SW
State	10.00	20.00	10.00			Birth Date
Council/County/Parish						Date joined
Club						Date re-joined
Total						

Sign and send with total membership dues to Club Treasurer by _____

Member Signature _____

Must be original signature, copies will not be accepted

PLEASE INDICATE:

- _____ Re-joined (Have not belonged for a time)
- _____ Independent Member (Does not belong to a club)
- _____ New Member (Never belonged to FCE before)
- _____ Change of address, etc.
- _____ Club President - 2017
- _____ County Council President - 2017

Mission... To strengthen individuals, families, and communities through continuing education, developing leadership, and community action.