

CAMPUS CIVITAN

FORM B

APPLICATION FOR CHARTER MEMBERSHIP

PLEASE PRINT. MAKE ADDITIONAL COPIES AS NEEDED.

Campus Civitan Club _____ Sponsor's Name _____
Name _____ School Telephone _____
School Address _____
City, State/Province, Postal Code _____
Summer/Home Address _____ Telephone _____
City, State/Province, Postal Code _____
E-mail _____
Date of Graduation _____ Classification _____ Major _____
Other organizations/activities _____
Optional information: Male Female Single Married Birth Date _____
Are you a former Civitan, Junior Civitan, or Campus Club? Yes No
If yes, please indicate what club: _____ City/State/Province _____

COMPLETED BY NEW MEMBERS ONLY

I hereby request membership in the _____
Civitan Club. Upon acceptance, I agree to be subject to its Con-
stitution, Bylaws, and official policies. I agree to pay the sum of
\$5.00 as an initiation fee, in addition to annual club and Civitan
International dues. I understand that \$1.25 of the Civitan Inter-
national annual dues applies to liability insurance.

Signature of Applicant

Date

COMPLETED BY FORMER JUNIOR CIVITANS, TRANSFERS, OR REINSTATED MEMBERS ONLY

I hereby request membership in the _____
Civitan Club. Upon acceptance, I agree to be subject to its Constitu-
tion, Bylaws, and official policies. I agree to pay annual club and
Civitan International dues I understand that \$1.25 of the Civitan
International annual dues applies to liability insurance, and that my
initiation fee is waived.

Signature of Applicant

Date

CAMPUS CIVITAN

FORM B

APPLICATION FOR CHARTER MEMBERSHIP

PLEASE PRINT. MAKE ADDITIONAL COPIES AS NEEDED.

Campus Civitan Club _____ Sponsor's Name _____
Name _____ School Telephone _____
School Address _____
City, State/Province, Postal Code _____
Summer/Home Address _____ Telephone _____
City, State/Province, Postal Code _____
E-mail _____
Date of Graduation _____ Classification _____ Major _____
Other organizations/activities _____
Optional information: Male Female Single Married Birth Date _____
Are you a former Civitan, Junior Civitan, or Campus Club? Yes No
If yes, please indicate what club: _____ City/State/Province _____

COMPLETED BY NEW MEMBERS ONLY

I hereby request membership in the _____
Civitan Club. Upon acceptance, I agree to be subject to its Con-
stitution, Bylaws, and official policies. I agree to pay the sum of
\$5.00 as an initiation fee, in addition to annual club and Civitan
International dues. I understand that \$1.25 of the Civitan Inter-
national annual dues applies to liability insurance.

Signature of Applicant

Date

COMPLETED BY FORMER JUNIOR CIVITANS, TRANSFERS, OR REINSTATED MEMBERS ONLY

I hereby request membership in the _____
Civitan Club. Upon acceptance, I agree to be subject to its Constitu-
tion, Bylaws, and official policies. I agree to pay annual club and
Civitan International dues I understand that \$1.25 of the Civitan
International annual dues applies to liability insurance, and that my
initiation fee is waived.

Signature of Applicant

Date