

\$10.00 Application Fee  
\$15.00 Dues  
**\$25.00 Due With Application**  
\$10.00 Food (optional)  
**\$35.00 Due with Application**

Ladies Auxiliary  
Bellevue Veterans Club

Revised 03/14/2017

**No Refunds**

**Application For Membership**

**Personal Information :**

Date: \_\_\_\_\_

Name \_\_\_\_\_  
First Middle Last

D.O.B \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Number : \_\_\_\_\_ Work Number: \_\_\_\_\_

Email Adress: \_\_\_\_\_

**Affiliation With Men's Club :**

\_\_\_\_\_ Spouse of Member Name \_\_\_\_\_

\_\_\_\_\_ Other Name \_\_\_\_\_

\_\_\_\_\_ None

**Recommended By : ( This Section is completed and Signed by Ladies Auxiliary Members ONLY )**

1. Name of Member \_\_\_\_\_

Members Signature \_\_\_\_\_

Comment \_\_\_\_\_

2. Name of Member \_\_\_\_\_

Members Signature \_\_\_\_\_

Comment \_\_\_\_\_

1) How did you Learn about the Bellevue Veterans Club Ladies Auxiliary?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2) What is / are your reason(s) for joining the Ladies Auxiliary ?

<input type="checkbox"/>	Help Support Youth Leagues	<input type="checkbox"/>	Membership Benfits
<input type="checkbox"/>	Community Involvement	<input type="checkbox"/>	Other (Please List Below)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3) Are you currently, or have you every been involved in a similar organization ? \_\_\_\_\_

If Yes, Please List \_\_\_\_\_  
\_\_\_\_\_

4) Where are you employed? \_\_\_\_\_

5) What activities / Functions do you want to be involved in ?

- |                                 |                               |
|---------------------------------|-------------------------------|
| Fundraisers                     | Social Activities for Members |
| Charity Events / Volunteer Work | Support of Youth Leagues      |
| Support men's club              | Other (Please List)           |

\_\_\_\_\_  
\_\_\_\_\_

6) Are you willing to be an Active Member ? (i.e. Attend Meetings / participate in activities)

Yes          or          No

7) Would you consider running for office, Charing a committee, or participating on a committee?

Yes          or          No

8) Do you have any Children and/or grandchildren ages 12 & under ? If yes please list

Name:	Age	Child / Grandchild
_____	_____	_____
_____	_____	_____
_____	_____	_____

(If you need more room Write on the back of the Page )

9) What is your Current Email: \_\_\_\_\_ What is your FaceBook Name \_\_\_\_\_

Application Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE - FOR COMMITTEE USE ONLY**

Application Statuses:

Reviews By : \_\_\_\_\_ Date: \_\_\_\_\_

Approved: \_\_\_\_\_ Rejected: \_\_\_\_\_

Comments : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date Notified : \_\_\_\_\_

Dues Information :

Received By : \_\_\_\_\_ Date: \_\_\_\_\_

Application Fee \$10.00 Yes or No

Dues Fee \$15.00 Yes or No

Food Fee \$10.00 Yes or No

Total : \_\_\_\_\_

**No Refunds**

Dues Card # \_\_\_\_\_

How did the New Member Pay ?

\_\_\_\_\_