

APPLICATION FOR MEMBERSHIP BLET AUXILIARY

A **\$10.00 Application Fee** must accompany this application, in addition to dues of **\$65.00** for active Members or **\$37.00** for **retired members over 60**, widows and widowers.

Date: _____

To: Officers and Members of: Auxiliary No. _____ BLET National Auxiliary.

I, the undersigned, hereby present myself as a candidate for admission to your organization. If accepted, I promise to abide by all laws, rules and regulations of the organization that are now in effect or may hereafter be enacted.

Applicant Signature: _____
Printed Name: _____
Address: _____
Phone No. () _____
Email Address: _____
Date of Birth: _____

Has Applicant ever applied for membership or been a member of another GIA or BLET Auxiliary? If so, please give the Auxiliary name and number _____, Auxiliary No. _____

Applicant Recommended by: _____

What is the relationship to your Sponsor?

____ Husband ____ Wife ____ Father ____ Mother ____ Son ____ Daughter

Sponsor is a member of Div./Aux. _____, City _____, State _____

Sponsor's Name: _____
Address: _____
Initiation Date: _____

Please return completed application and dues to your local auxiliary or

Jodi Wallace, National Secretary
1804 Washington Avenue
La Grande, Oregon 97850