



P.O. Box 2472
Bismarck, ND 58502

Club Membership Application

Club Name _____

Address _____

City _____ State _____ Zip _____

Current President _____

Phone (____) ____ - ____ Email _____

Amount Enclosed \$ _____ Date Paid ____ / ____ / ____

Each Club Member is represented on the Executive Board by two delegates. Please provide the following information on your current delegates:

Delegate 1

Name _____

Address _____

Phone (____) - ____ - _____

Email _____

Delegate 2

Name _____

Address _____

Phone (____) - ____ - _____

Email _____