



## 2017-2018 NEW MEMBER APPLICATION FORM

*To be completed by the Prospective Member*

**FORM IS DUE TO THE JUNIOR LEAGUE CENTER BY WEDNESDAY APRIL 26, 2017.**

2302 Midwestern Parkway, Wichita Falls, TX 76308 (940) 692-9797

### CANDIDATE INFORMATION:

Name: (Ms./Miss/Mrs./Dr.) First \_\_\_\_\_ Maiden \_\_\_\_\_ Last \_\_\_\_\_

Address/City/State/Zip: \_\_\_\_\_

Telephone Numbers: Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Email: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Profession: \_\_\_\_\_ Full Time/Part Time: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_

### BACKGROUND INFORMATION:

Current volunteer experience:

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Past volunteer experience:

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Community organizations and/or professional affiliations (including offices held):

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Special Skills & Interests:

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Please list 2 Volunteer or Work Referrals. Make sure you include their name, position and phone number:

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_

### Questions? Please contact:

Sarah Williams  
2016-2017 Membership Vice-President  
jlwfmembership@gmail.com