



**2017 Membership Form**  
**\*\*\*Type or Print Clearly in ink\*\*\***

\*\*\*Do Not Abbreviate City, County, Street or State Names\*\*\*

Date \_\_\_\_\_ Current Member ID# \_\_\_\_\_ Email \_\_\_\_\_

First Name \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code+4 \_\_\_\_\_

Phone No \_\_\_\_\_ County of Residence \_\_\_\_\_

Club Name \_\_\_\_\_ Club County \_\_\_\_\_

Family Membership: (Please list) Spouse Name \_\_\_\_\_

Dependent Child(ren) \_\_\_\_\_

<b>Dues</b>	<b>Individual (19 – 79)</b>	<b>Family</b>	<b>Senior (80+ years)</b>	<b>Youth 18 and under</b>
National	\$ 20.00	\$ 30.00	\$16.50	\$ 5.00
State	3.50	7.00	3.50	0
Council/County/Parish				
Club				
<b>Total</b>				

Sign and send with total membership dues to Club Treasurer by September 30, 2016

New Member (Never belonged to FCE before)

Member Signature \_\_\_\_\_

Must be original signature, copies will not be accepted

Mission...To strengthen individuals, families, and communities  
 through continuing education, developing leadership, and community action.