



**2018 Membership Form**  
**\*\*\*Type or Print Clearly in ink\*\*\***  
**\*\*\*Do Not Abbreviate City, County, or State Street Names\*\*\***

Date \_\_\_\_\_ Current Member ID# \_\_\_\_\_  
 First Name \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ **Zip Code +4** \_\_\_\_\_  
 Phone No. \_\_\_\_\_ Cell Phone No \_\_\_\_\_  
 Email \_\_\_\_\_ County of Residence \_\_\_\_\_  
 Club Name \_\_\_\_\_ Club County \_\_\_\_\_

Family Membership: (Please list) Spouse Name \_\_\_\_\_  
 Dependent Child(ren) \_\_\_\_\_

Dues	Individual	Family	Senior (80+ years)	Youth Under 18		<u>Kansas Information</u>
National	\$20.00	\$30.00	\$16.50	\$5.00		Area (Circle One) NE NW SC SE SW
State	10.00	20.00	10.00			Birth Date
Council/County/Parish						Date joined
Club						Date re-joined
Total						

Sign and send with total membership dues to Club Treasurer by \_\_\_\_\_

**Member Signature** \_\_\_\_\_  
 Must be original signature, copies will not be accepted

**PLEASE INDICATE:**

- |   |  |
|---|--|
| <input type="checkbox"/> Re-joined (Have not belonged for a time)       | <input type="checkbox"/> Change of address, etc.         |
| <input type="checkbox"/> Independent Member (Does not belong to a club) | <input type="checkbox"/> Club President - 2018           |
| <input type="checkbox"/> New Member (Never belonged to FCE before)      | <input type="checkbox"/> County Council President - 2018 |

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