



2021 Membership Form

*****Type or Print Clearly in ink*****

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

Date _____ Current Member ID# _____

First Name _____ M.I. _____ Last Name _____

Mailing Address _____

City _____ State _____ **Zip Code +4** _____

Phone No. _____ Cell Phone No _____

E-mail _____ 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	\$30.00	\$40.00	\$26.50	\$5.00	Area: NE NW SC SE SW (Circle One)
State	10.00	20.00	10.00	0	Birth Date (MM/DD/YYYY)
Council/County/Parish					Date joined
Club					Date dropped /Date re-joined
Contribution/Donation to KAFCE *					
Contribution/Donation to NAFCE*					
Contribution/Donation to ACWW*					
Total					

*Refer to the Dues and Contribution Report Form list of choices that you may choose to support Sign and send with total membership dues to Club Treasurer by _____

Member Signature _____
 Must be original signature, copies will not be accepted

PLEASE INDICATE: (Check all that Apply)

- | | |
|--|--|
| <input type="checkbox"/> New Member (Never belonged to FCE before) | <input type="checkbox"/> Change of address, etc. |
| <input type="checkbox"/> Re-joined (Have not belonged for a time) | <input type="checkbox"/> Club President - 2021 |
| <input type="checkbox"/> Independent Member (Does not belong to a FCE Unit) | <input type="checkbox"/> County Council President - 2021 |

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