



2025 Membership Form

TYPE OR PRINT CLEARLY IN BLACK INK

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

Date _____ Current Member ID# KS - _____ - ____

First Name _____ M.I. _____ Last Name _____

Mailing Address _____

City _____ State _____ Zip Code +4 _____

Email _____ Phone/Cell# _____

Club/Unit's Name _____ Club/Unit's County _____

Family Membership (Please list): Spouse Name _____

Dependent Child (ren) _____

Dues	Individual Member	Family Membership	Senior Member (80+ years)	Youth Member (Under 18)	<u>Kansas Information</u> Area (Circle One):
National	\$35.00	\$45.00	\$31.50	\$5.00	NE NW SC SE SW
State	\$10.00	\$20.00	\$10.00	0	Birth Date (MM/DD/YYYY)
Council/County	\$3.00				Date joined
Club/Unit	\$2.00				Date dropped
Donation to KAFCE *					Date re-joined
Donation to NAFCE *					Years of Membership in 2025
Donation to ACWW *					↙
Total Amount Enclosed	\$50.00				

*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/Unit Treasurer by _____

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

PLEASE INDICATE: (Check all that Apply)

_____ **Independent Member** (Does not belong to a FCE Unit) County of Residence _____

_____ New Member (Never belonged to FCE before) _____ Change of address, etc.

_____ Re-joined Member (Have not belonged for a time) _____ Club President - 2025

_____ County Council President - 2025

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