

Greene Optimist

Membership Application

Name _____ Preferred Name _____

Home Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____ Email _____

Firm Name _____ Type of Business _____

Position or Title _____

Business Address _____

City _____ State _____ Zip Code _____ Bus. Phone _____

Email address _____ Preferred email _____

Date of Birth _____ Years in the Community _____

Spouse/Partner Name _____

Children's names and ages _____

How would you like your "name badge" to read _____

Your Signature indicates your acceptance of this invitation.

Signature _____ Date _____

Sponsor _____ recommends you for membership.

COMPLETED APPLICATION MUST BE ACCOMPANIED BY \$30.00 APPLICATION FEE

Date approved by board of directors _____

Individuals who have committed offenses against children may be denied membership and/or have their membership revoked.