



# EXCHANGE CLUB

## OF WALLA WALLA

### MEMBERSHIP APPLICATION

#### PERSONAL INFORMATION

Name:	Date of Birth:	Spouse:
Home Address:		
City:	State:	ZIP Code:

#### CONTACT INFORMATION

Home Phone:	Cell Phone:	Work Phone:
Preferred Email:	Work Email:	

#### EMPLOYMENT INFORMATION

Employer:		
Title:	Profession:	
Employer Address:		
City:	State:	ZIP Code:

#### AREAS OF INTEREST

<input type="checkbox"/> Community Involvement	<input type="checkbox"/> Youth Activities	
<input type="checkbox"/> Americanism	<input type="checkbox"/> Children's Easter Egg Hunt	
<input type="checkbox"/> Child Abuse Prevention	<input type="checkbox"/> Youth of the Month/Year & ACE Award	
<input type="checkbox"/> Rodeo	<input type="checkbox"/> Community Bank Ducky Derby	
<input type="checkbox"/> Club Member Activities	<input type="checkbox"/> Sponsors	<input type="checkbox"/> Marketing
<input type="checkbox"/> Family Picnic	<input type="checkbox"/> Ticket Sales	<input type="checkbox"/> Duck Logistics
<input type="checkbox"/> Adult Holiday Party	<input type="checkbox"/> Family Festival	
<input type="checkbox"/> Children's Christmas Party	<input type="checkbox"/> Other	
<input type="checkbox"/> Valentine's Party		

#### GETTING TO KNOW YOU

List past or present professional or service club memberships and offices held:

Please list the names and ages of any children in your home:

Name/Age:	Name/Age:
Name/Age:	Name/Age:

Would you like to share your hobbies?

What attracted you to Exchange?

Are there things you would like us to know about you?

#### SIGNATURES

I hereby qualify as a member of the Exchange Club and shall be granted all the rights and privileges of membership. I agree to adhere to all Club rules, regulations, and policies. By signing, I understand that upon acceptance of my application, I will be invoiced for a prorated portion of the first quarterly dues plus the \$60 application fee.



Signature of applicant:	Date:
Sponsor:	Date: