

Lifetime Membership Form



ifetime Member name (pl	ease print)			
Address				
City	State	Zip	Telephone	Email
EP 2: Please complete only	if the applicant is a form	er or cur	rent registered member:	
ID number	Council name			
Please complete only if the	applicant is a graduatin	g Girl Sco	out Senior:	
Month/year of high school	or equivalent) graduation	า		
EP 3: Payment information				
☐ Check ☐ Money Orde				
If you are giving this Lifetin	ne Membership as a GIFT	Γ, please (complete the following:	
Your name (please print)				
Address				
City	State	Zip	Telephone	Email
Mail this membership to (check one): \square Me \square L	ifetime N	Member	
Check or money order pay	ment (check one):			
	vho is not a former girl m	ember;	☐ Young Alumnae Lifetir Former girl member v	ne Member: \$200 vho is 18 to 29 years old
	vho is 30 years or older			
Adult 18 years or older v or former girl member v	-	:		
or former girl member v Credit card payment I wish	-			
Adult 18 years or older v or former girl member v Credit card payment I wish	to charge the payment of		Expiration date	
Adult 18 years or older vor former girl member vor former girl member vor credit card payment I wish	to charge the payment of mEx	□ Visa	Expiration date	