

Job's Daughters International Oklahoma Alumni Association

Application For Membership

Name:				
FIRST	MIDDLE	LAST		BIRTH DATE
Address:				
City, State, Zip:				
Email Address:				
Home Phone: (_)	Cell Phone	: ()	-
ELIGIBILITY: I Claim El	ligibility To Membersh	ip Because I Am:		
An Adult Who Guardian Cou I Have Completed My	ncil For A <u>Minimum O</u> Certified Adult Volunt	Sethel, Oklahoma Job's	YesN	o. CAV#
Initiated Into JDI:	.	C		
initiated into 3Di	Date	Bethel Number	City, State	
Majority In JDI:				
	Date	Bethel Number	City, State	
Job's Daughters Titles	and Awards		Place Add	itional Information On Bac
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Bethel Guardian Council Titles (List Year, Bethel#, Location)	Place Additional Information On Back
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Committees and State Committees (List Year)	Place Additional Information On Back
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Memberships and Committees – Other Organizations	Place Additional Information On Back
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Skills and Talents	Place Additional Information On Back
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Professional Networking (OPTIONAL)	
Profession:	Company:
Email:	
Address:	
City, State, Zip:	
Phone Number: ()	
Description:	
Description.	
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Additional Information:	
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Life Membership in the Oklahoma Alumni Asso \$25.00.	ociation is \$50.00. You can pay your membership in installments of
Make your check or money order payable to:	Oklahoma Alumni Association

Please contact the Association Secretary to determine where to send your application, check or money order.