The National Organization of Emblem Clubs The Supreme Emblem Club of the United States of America ®



Application for Membership

Reinstatement, or Demit, or Dual Membership

The following information is to be verified by Club Membership Chairman for accuracy before submitting to Club Financial Secretary			
CLUB NAME	NUMBER	DATE	
CLUB ADDRESS	C'h.	Object 7 in Ondo	
P. O. Box	City The following to be completed 1		
Name of Applicant:		Month & Date of Birth: /	
		Month & Date of Anniversary:/	
		State Zip -	
		Occupation	
		Do you believe in God?	
		•	
Name of Emblem Club Sponsor			
Signature of Emblem Club Sponsor			
Name of Elk Relative/and or Sponsor		Elk Sponsor Lodge Number	
Signature of Elk Relative/and or Elk Spons	or		
Are you a former Emblem member?	_If yes, Club Name:	Club Number:	<u></u>
Did you serve as a Past President? No	YesWhen	enClub Name & Number	
When and how was membership severed?			
I enclose with this application, Annual Dues \$ and the Initiation Fee of \$			
Signature of Applicant		Date	
(FALSIFICATION OF ANY INFORMATION SHALL RESULT IN EXPULSION OF MEMBER) Note: Membership is contingent upon a majority vote of the membership. If accepted, the applicant will be notified of the date, time, and place of			
Initiation. If not accepted for membership, all money will be refunded, and applicant will be notified with a courteous letter. Applicant not accepted for membership, may apply again in six (6) months. Only a new member is to be initiated.			
THE FOLLOWING IS TO BE COMPLETED BY THE <u>CLUB FINANCIAL SECRETARY</u> AND RETAINED PERMANENTLY IN CLUB FILE Note: If this form is used for purpose of a Demit, a <u>Demit Form</u> must still be issued to member, for presentation to the Club for acceptance. Member must reinstate in the Original Club before being given a Demit by Original Club. Please order Demit Form(s) from the <u>Supreme Publisher and Resource Manager</u> , address inside front page of Topics. The above applicant is applying for one of the following, and one is marked with an X:			
		nit Dual Membership	
Permanent Membership Number:			
Date Voted on Date Accepted Date Initiated Date Rejected If this form is filled out for a Demit, indicate which Club the member is demitting from, and what Club member is demitting or reinstating to: Demit from Club Name: Club No:			
Demit/Reinstate to Club Name:		Club No:	
Dual Membership: Original Club:	Dual (l Club:	

Please send <u>typed</u> list of new members/addresses, dropped members, dual members addresses, and deceased members, as they occur, to TOPICS Circulation, PSP Donna Mazzola, 17 Gilbert Street, West Newton, MA 02465-2210