

SOUTH CAROLINA FAMILY AND COMMUNITY LEADERS

AFFILIATED WITH
NATIONAL VOLUNTEER OUTREACH NETWORK

COUNTRY WOMEN'S COUNCIL, U.S.A. ASSOCIATED COUNTRY WOMEN OF THE WORLD

AND IN PARTNERSHIP WITH CLEMSON UNIVERSITY COOPERATIVE EXTENSION SERVICE

Member Application/Renewal

I w	would like to join/rejoin SCFCL	print clearly
Co	ounty (if applicable)	
Clı	ub (if applicable)	
Na	me	Birth Year
Ad	ldress	
Cit	ty, State, Zip code	
En	nail	
Te	lephone	Cell & TXT
Ra		Sex
Sig	gnature	Date
_ _		ys <u>county</u> and <u>state</u> dues but not a member of a club. s <u>county</u> and <u>state</u> dues and is a member of <u>more than one club</u> .
	Individual Member-person pays st	tate dues but does not pay county or club dues.
Wł	here did you hear about SCFCL?	
Wł	ho invited you to join?	
1.	New Members (Regular, Associate, Affiliate) should give this completed application to the County Treasurer along with a check for club (if applicable), county and state dues. The County Treasurer will mail this application along with a county check for the amount of state dues (\$6.00 per member per year) to:	
2	Individual Mamban should sand	this application along with a shoot for the amount of state dues

2. Individual Member should send this application along with a check for the amount of state dues (\$6.00 per member per year) to:

Silverteen Mitchum, SCFCL Treasurer

County Treasurer make check payable to: SCFCL

18 Saxon Road Ext., Kingstree, 29556

Phone: Home 843.382.5918, Cell/Text 843.601.4727

Email: silverteenmitchum@hotmail.com