



# EXCHANGE MEMBERSHIP CERTIFICATION

*Top portion must be completed by club officer before mailing*

Exchange Club of Quincy State Illinois Club # 1447

Club Officer's Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Type:  New Member  Reinstatement  Change of Classification  Transfer (From club # \_\_\_\_\_)

Classification:  Active  Active Honorary  At-Large  Life  Honorary  Active Military

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.

*(Please Print)*

Name \_\_\_\_\_  M  F Nickname \_\_\_\_\_  
(First) (M.I.) (Last)

Spouse \_\_\_\_\_ Nickname \_\_\_\_\_  
(First) (M.I.) (Last)

Address \_\_\_\_\_ E-Mail \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ -

Home Phone ( ) - \_\_\_\_\_ Buisness ( ) - \_\_\_\_\_

Fax Number ( ) - \_\_\_\_\_ Profession \_\_\_\_\_

Date of Birth \_\_\_\_\_ Member's Signature \_\_\_\_\_  
(Month/Day/Year)

Sponsor \_\_\_\_\_ Sponsor's Club Quincy