



### Individual Membership Application Form

I would like to join SCFCL as an Individual Member.

Have you ever been a FCL member before?  Yes  No

If yes, when ? \_\_\_\_\_ Where ? \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip code \_\_\_\_\_

E-mail Address \_\_\_\_\_

Telephone (    ) \_\_\_\_\_

County \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Dues \$4.00 per year (January – December) \$ \_\_\_\_\_

Voluntary donations to:

Pennies for Friendship \$ \_\_\_\_\_

Nickels for South Carolina Youth \$ \_\_\_\_\_

Johnson-Walker Scholarship \$ \_\_\_\_\_

Landrum-Layton Scholarship \$ \_\_\_\_\_

Marion Baxter-Paul Scholarship \$ \_\_\_\_\_

Ruth B Sayre Scholarship \$ \_\_\_\_\_

Buff-Swicegood Travel Study Award \$ \_\_\_\_\_

NVON \$ \_\_\_\_\_

**TOTAL amount enclosed** \$ \_\_\_\_\_

Make check payable to: **SCFCL** (South Carolina Family and Community Leaders)

Mail to: SCFCL Treasurer