



Creating Mobility and Independence For People With Disabilities

ENID NOON AMBUCS

P.O. Box 406

Enid, OK 73702

MEMBERSHIP APPLICATION

DATE: _____ FULL NAME: _____

BIRTHDAY: _____ SPOUSE NAME: _____

WORK ADDRESS: Preferred? Yes/No HOME ADDRESS: Preferred? Yes/No
Street: _____ Street: _____

City/State/ZIP: _____ City/State/ZIP: _____

Work Phone: _____ Home Phone: _____

OCCUPATION: _____ EMPLOYER: _____

E-MAIL _____ SPONSOR'S NAME: _____

HAVE YOU BEEN AN AMBUC MEMBER BEFORE? ___ YES ___ NO

INFORMATION ABOUT YOUR DUES

Dues are calculated on a quarterly basis and billings are sent out as of the following dates: January 1, April 1, July 1, and October 1. The billing is for the quarter beginning on these dates, not for the quarter just ended. The dues breakdown is as follows: Meals—13 @ \$9.00 ea., \$117.00/Quarter; National dues, \$11.25; District dues, \$5.25; Enid Noon club dues, \$6.10; Convention Fund dues, \$3.70; Living Endowment donation, \$10.00 (optional); **Total \$153.35.**

Signature: _____