

# SCYPR Membership Application

***“Building leaders for the new millennium”***

Name:

Address:

City:

State:

Zip:

Phone:

Office:

Cell:

Fax:

Email:

Birthdays: mm/day/year

(required by constitution and by-laws)

Are you a US Citizen?

Yes  No

Are you between the ages of 18 & 40?

Yes  No

Are you a FL resident?

Yes  No

Are you a registered Republican?

Yes  No

How were you referred to the SCYPR's:

Meetup  Upcoming  MySpace  Facebook  Friend  Other: \_\_\_\_\_

Check the committees you would be interested in:

Membership  Social  Programs  Campaigns / Elections  Media /PR

Signature:

Date:

For Treasurer's Use Only:

Single: \$20

Couple: \$35

Membership Type:  Active  Associate

Date Dues Paid: \_\_\_\_\_

Collected By: \_\_\_\_\_

Cash  Check # \_\_\_\_\_

FFYR Paid: \_\_\_\_\_ Date: \_\_\_\_\_