



# SUFFIELD LEAGUE

## Membership Application

Name: \_\_\_\_\_

Board Use Only

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Occupation: \_\_\_\_\_

Board Vote:
Approved
Denied
Date:

Are you over the age of 21? \_\_\_\_\_

Why do you want to become a member of the Suffield League? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Would you consider becoming an Officer of the Suffield League? \_\_\_\_\_

Have you ever been involved with a Volunteer Organization? \_\_\_\_\_

Have you done any fundraising? \_\_\_\_\_

What special skills or talents do you feel you can bring to this organization? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

The Suffield League's mission is to promote the small town ideals of our community, to nurture the spirit of volunteerism, and to give back to our town by providing opportunities for individuals and organizations to serve by sponsoring events and projects that benefit all.