



BILLINGS HEIGHTS EXCHANGE

*in Education Service to Citizens of communities, states and the nation
SERVING THE HEIGHTS TODAY FOR A BETTER TOMORROW*

Name: _____ Nickname: _____

Birthday: _____ Employer: _____

Position: _____

Work Phone: _____

Home Address: _____

Home Phone: _____ E-mail: _____

Spouse's Name: _____ Number of Children: _____

Who Invited You To The Heights Exchange Club: _____

Do you know other members of the club? _____

CERTIFICATIONS:

The undersigned applies for the Heights Exchange Club

Applicants Must initial

TRUE STATEMENTS: All statements made in this application are true and correct and will be used for the purpose of evaluating membership eligibility. _____

R-SERVING TRAINING: I understand that taking and passing the R-Serving certification is required before I may volunteer in my Club's fundraiser event. _____

DUES: I understand the membership dues for Heights Exchange Club are \$90 per quarter and due in a timely manner. _____

FUNDRAISING EVENTS: I understand that members are required to be available to work a minimum of three events per year. _____

COMMITTEES: While participating on a committee is not a requirement, the involvement of all members on committees only goes to the greater overall good of the Club. _____

I fully understand that my membership is subject to termination for failing to meet above standards.

SIGNATURE:

Applicant: _____ Date: _____