



Charity Newsies
4300 Indianola Avenue
Columbus, OH 43214
Phone: 614.263.4300
www.charitynewsies.org

APPLICATION FOR MEMBERSHIP

Application Date: _____

Please print legibly.

Full Legal Name: _____

Name you prefer to be called (if different): _____

Residence Address: _____

Telephone: Home: _____ Work: _____ Mobile: _____

Email Address: _____

Date of Birth: ____/____/____

Place of Employment: _____

Business Address: _____

Position/Title: _____

Emergency Contact: Name: _____

Relationship: _____

Address: _____

Telephone: Home: _____ Work: _____ Mobile: _____

Reason for wanting to become a member of Charity Newsies (attach additional sheets as necessary):

“Community Service Since 1907”



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Application Fee: First Year \$100.00

Please read carefully:

If accepted, I will comply with the rules and regulations of the Charity Newsies. Furthermore, I will give reasonable time to the Newsies' activities and will carry out those duties assigned to me. I authorize the Charity Newsies to review credit, criminal, and other appropriate records to determine my worthiness for membership. | certify that I am a citizen of the United States and at least 21 years of age.

The Board of Trustees of Charity Newsies has directed the Membership Committee to outline a list of activities required of members to generate awareness of what is expected from each member of the Charity Newsies. Such activities include: the annual paper sale, home visits, membership meetings, the Clothe-A-Child Auction, and working at headquarters.

I understand all of the above and also acknowledge that these activities are my obligation throughout my membership commitment.

Signature of Application: _____ Date: _____

SPONSOR'S DECLARATION

Sponsor's Printed Name

Sponsor's Signature

Relationship to Application

Date

“Community Service Since 1907”