CHAPTER: DATE OF EVENT:

INSTRUCTIONS:

- 1. List ONLY the registered members
- 2. Check the appropriate reason box
- 3. Use a separate form for EACH REASON
- 4. Print or type clearly (USE BLACK INK)
- 5. Give COMPLETE address information for mailing label

MEMBERSHIP ROSTER JACCOS TOWNE LODGE

ORDER OF THE ARROW

DISTRIBUTION:
LODGE - EMAIL TO
juearl@crossroadsbsa.org

REASON:	DUES	ACCOUNT
NEW ORDEA	1 \$ 5.00	60AD
NEW BRO'HI		
MEMBERS		
DUES ONLY	\$10.00	60AD
CHANGE OF	ADDRESS	
OTHER		

FORMS MUST BE COMPLETED AND TURNED INTO THE LODGE WITHIN 5 DAYS AFTER EVENT

	PRINT FULL NAME First MI Last		JLL NAME			ZIP DAT	DATE					
ID #	First	MI	Last	MAILING ADDRESS	CITY	CODE	DATE OF BIRTH	UNIT	DIST	PHONE	EMAIL	Dues

Number of names listed

DUES PAID UNTIL DECEMBER 31,_____

DUES SUBMITTED

RECEIPT NO.

SUBMITTED BY _____ DATE ____

CROSSROADS OF AMERICA COUNCIL

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