

APPLICATION FOR SENATORSHIP

SUBMIT APPLICATION TO: PROCESSING AND SHIPMENT: Please allow approximately three weeks for processing and mailing Junior Chamber International **ATTN: Senate Administrator** from the JCI Headquarters. Package will be shipped by: 15645 Olive Blvd. **Regular Mail**, unless otherwise indicated. Delivery may take up to Chesterfield MO 63017, U.S.A. six weeks. Tel: (1)(636)449-3100 FAX: (1)(636)449-3107 UPS (courier service), which provides fast and guaranteed E-mail: senate@jci.cc delivery to most regions. Shipping cost: Africa & Middle East - US\$80.00* Americas - US\$80.00* Asia and the Pacific - US\$65.00* Europe - US\$65.00* United States - US\$25.00* * The shipping cost includes shipping for two senatorships. More than two will be an additional cost. **APPLICANT'S DATA** Please PRINT clearly in BLOCK LETTERS We wish to file an application for membership in the JCI Senate for: First Name Middle Name Last Name

| Address of Applicant | | | | | |
|--|---|--|--|--|--|
| | | | | | |
| City, State, Zip Code (Postal Zone) | Country | | | | |
| Tel. (Res.): | <i>Tel. (Bus.):</i> | | | | |
| Fax: | Email Address (REQUIRED): | | | | |
| | | | | | |
| Date of Birth (e.g. 11/2/58): Month Day Year | Occupation: | | | | |
| JUNIOR CHAMBER HISTORY OF APPLICANT | | | | | |
| Date applicant joined Junior Chamber: | Date applicant ceased to be a member (if applicable): | | | | |
| Activities in Junior Chamber | | | | | |

Current and Past Junior Chamber Position(s) of Applicant

Reason(s) for Award of Senatorship If space is insufficient, please include additional page(s).

| LANGUAGE PREFERENCE | | | | | | |
|---|-----------------------------|-----------------------------|--------|--|--|--|
| Please check $()$ the appropriate box provided below. | | | | | | |
| Applicant would like to receive certificate in: | English | Spanish | French | | | |
| GENDER MALE FEMALE | | | | | | |
| Junior Chamber International (JCI), Ir | nc. • 15645 Olive Blvd, Che | sterfield, M0 63017, U.S.A. | | | | |

Junior Chamber International (JCI), Inc. • 15645 Olive Blvd, Chesterfield, M0 63017, U.S.A. Tel.: (1) (636) 449-3100 • Fax: (1) (636) 449-3107 • Homepage: <u>www.jci.cc</u> • Email: <u>senate@jci.cc</u>

| No approva | APPROV al other than indicated | AL PROCESS | | permitted. | |
|--|--|--|------------------|--------------------------|-----------------|
| Name of Local Organization: | | | | | |
| • | (Pl | lease <u>PRINT</u>) | | | |
| Approved by: <u>x</u> | | | | | |
| | (Signature of | f Chapter President) | | | (Date) |
| Name of State Organization: | | | | | |
| if applicable | (Pl | lease <u>PRINT</u>) | | | |
| Approved by: x | | | | | |
| | | e of State Presiden t) | | | (Date) |
| Name of National Organization | | | | | |
| | (Ple | ase <u>PRINT</u>) | | | |
| Approved by: X | Signature | e of National President) | | | (Date) |
| Please ensure that | | • | es are obt | tained as requ | |
| INFOR If Senatorship is to be presented | | URPRISE PRI formation clearly b ovide the following in | ESENTA elow.) | ATION | not provided, |
| documents will be sent to the corre- | sponding national organiz | ation): | | | |
| Name : Address: <u>IMPORTANT</u> : If cour | rier shipment is required, kin | adly provide the STREE | T ADDRESS | ↑ (no P.O. box, pleas | re) |
| <i>City, State, Zip Code (Postal Zone)</i> ↑ | | | | Country | |
| Tel. (Bus.)#: | | Tel. (Res.)#: | | | |
| Fax#: | | Email Address: | | | |
| Date Senate Document Mu | | | al Presen | tation Date: | |
| Please submit US\$300 for payme . Kindly select (√) from the following | ent of a lifetime Senatorsh | | ssing foo por | applicant | |
| | | | | 1 1 | |
| Check (√) appropriate box: Clearly <u>PRINT</u> card#: | MASTERCARD | DINERS CLUB | VISA | | AN EXPRESS |
| Clearly PRINT Expiration Date: & CVV | 1 | 1 | | | |
| | | x | | | |
| Name of Credit Card Ho | lder (please PRINT clear | | | Signature | |
| CHECK DRAWN ON NO | OTE: Check should be hamber International (to a | drawn on a U.S. ba | | dollars made paya | able to Junior |
| | OTE: Please cover the w | | | | ∕tra ∐S\$20 to |
| | over the wire transfer trans | | • | | |
| To ensure the proper account is cre | edited, please send a fax | (636-449-3107) or en | nail to the att | tention of Senate a | dministrator at |
| support@jci.cc be sure and put on | - | · , | | | |
| PLEASE SEND PAYMENT | | | 1) Amount | of transfer | |
| Enterprise Banking, 300 St. Pete St. Peters, MO 63376, U.S.A. | ers Centre Boulevard Account: 0000076291 | : | 2) Transac | tion date | |

ABA (routing no.): 081006162 SWIFT CODE: ENTRUS44

Junior Chamber International (JCI), Inc.

3) Reason for transfer (e.g. Senatorship).