



2017-2018
Membership Application

Prospective Provisional's Name:

First Middle Maiden Last Preferred Name: _____

Address: _____ City/State/Zip: _____ Phone Numbers:

Home: _____ Work: _____ Cell: _____

Email: _____

Occupation: _____

Employer: _____ Birthdate (MM/DD/YY): _____

Shirt Size: _____

Each potential member must secure two current or former JLS members to serve as sponsors. Please list your sponsors and their e-mail addresses below:

Please provide answers to the following questions for us to better understand your interest and/or involvement in community service:

1. What do you hope to gain from your membership in The Junior League of the Shoals?

2. Please describe any areas of special interest, personal skills, and/or professional expertise that you can contribute to the ongoing efforts of the League.



3.) Please list and describe any current or past volunteer service (i.e., participation in volunteer programs, board membership, work within the community, etc.)

4.) The Junior League of the Shoals places high emphasis on fundraising to help support local charities and not-for-profit organizations. Have you had any previous experience in fundraising? If so, please describe below:

By initialing below, you understand that the Junior League of the Shoals is dedicated to providing a positive impact in the Shoals area by providing volunteer services and fundraising to improve the health, education and welfare of women and children.

Initials: _____