Recommendation for Membership

LA CAÑADA THURSDAY CLUB

CANDIDATE'S Name (please print)

_____

(Miss/Ms./Mrs./Dr.) (First) (Last)

Husband's Name _____

(Mr./Dr.) (First) (Last)

Address _____

City _____ Zip Code _____

Birthday (mm/dd/yy) _____ Home Phone _____

Cell Phone _____ Work Phone _____

Email _____

Check the following Club activities according to your interests:

- ☐ Bridge
- ☐ Book Group
- ☐ Contemporary Interest
- ☐ Philanthropy
- ☐ Community Relations
- ☐ Event Planning
- ☐ Debutante 2020 (Membership deadline 3/31/19)*

Other Club Affiliations and/or Board Positions

Do you have any skills or training that you think might benefit our club?

* To participate in the 2020 Debutante Program, you must become a Club Member by *March 31, 2019*. Please note that you must attend at least one Club meeting before joining the Club.

I understand and respect the rules and traditions of the La Cañada Thursday Club.

CANDIDATE'S Signature: _____ Date _____

Children at home (sons and daughters) and/or nieces and granddaughters eligible for Debutante Program:

Name	M/F	Age	School	Grade
Name	M/F	Age	School	Grade
Name	M/F	Age	School	Grade

The following information must be completed by each sponsor.

FIRST SPONSOR (print name): _____

How long and how well have you known this candidate, and why do you believe she would make a good Club member?

I understand that I will guide and support this new Thursday Club member.

FIRST SPONSOR Signature _____ Date _____

SECOND SPONSOR (print name): _____

How long and how well have you known this candidate, and why do you believe she would make a good Club member?

I understand that I will guide and support this new Thursday Club member.

SECOND SPONSOR Signature _____ Date _____

Mail the completed form, along with your check, to Alice Ryan, Membership Chair.

Revised 10/18