Star Pin Order Form

FORM FOR INDIVIDUAL RECRUITER OF NEW MEMBERS FOR STAR PINS

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| --- | --- |
| ***Club Name and State*** | Date |
| ***Recruiter’s Name*** |
| Mailing Address |
| City | State | Zip Code |
| ***NAMES AND CONTACT INFORMATION OF NEW MEMBERS*** |
| Name |
| Mailing Address |
| City | State | Zip Code |
| Phone | E-mail |
|  |
| Name |
| Mailing Address |
| City | State | Zip Code |
| Phone | E-mail |
|  |
| Name |
| Mailing Address |
| City | State | Zip Code |
| Phone | E-mail |
|  |
| Name |
| Mailing Address |
| City | State | Zip Code |
| Phone | E-mail |
|  |
| ***SIGNATURE OF CLUB PRESIDENT OR MEMBERSHIP CHAIRMAN*** |
| Print Name |
| Mailing Address |
| City | State | Zip Code |
| Phone | E-mail |

Mail completed form to your state’s membership chairman at her address.

NOTE: Send a separate form for each recruiter to avoid confusion.