*BLUE STAR MOTHERS OF AMERICA, INC*

NATIONAL BIG DIPPER *Auxiliary*

MEMBERSHIP APPLICATION/RENEWAL

LOUISIANA 2018-2019

NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ZIP: \_\_\_\_\_\_\_\_\_\_\_\_

PHONE: (\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CHAPTER STATE & NO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DEPARTMENT: \_\_\_BD LOUISIANA\_\_\_\_\_\_\_\_\_\_\_

***\*\* If you belong to a Department please send form to Department Big Dipper Financial Secretary \*\****

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Check No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Send form and check for $10.00 pay to the order of:

Big Dipper LA1 Auxiliary

c/o Financial Secretary

Dianna Michelli

PO Box 86507

Baton Rogue, LA 70879

Finsec.bd@bluestarmothers.us

For Big Dipper Use Only: ↓

Processed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Deposited:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_