



2017-2018 Crown Club Application

Name: _____ GPA: _____ T-Shirt Size: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

E-Mail Address: _____

Date of Birth: _____ School Name: _____

Parent/Guardian Name: _____

Parent/Guardian Contact Numbers: Cell: _____ Home: _____

Parent/Guardian email address: _____

Is any member of your family an active, associate, or life member of Junior Auxiliary of Jonesboro?
Yes or No

If so, Member name: _____ Relationship: _____

List any work or volunteer experience: _____

List any community, religious, or school related activities in which you participate(d) in:

List any special honors or awards you have received: _____



2017-2018 Crown Club Application
Page 2

Please describe why you would like to participate in Junior Auxiliary's Crown Club. Be specific about talents, skills and knowledge you would bring to this organization. _____

Briefly describe a community project that you would like to see developed and carried out by the Crown Club members: _____

Applicant Commitment:

Crown Club requires attendance at its meetings and participation in community service projects. I wish to Participate in Crown Club. I have full support of my parent(s) or guardian(s) for the time required to Participate. I will attend six(6) of the nine(9) meetings, complete 12 service hours and complete two(2) finance hours. I will be able to pay my \$25.00 yearly dues as required by Crown Club. I understand that failure to attend meetings and participate in service projects could result mean in being dropped from the club.

Applicant's Signature: _____

Date: _____

Parent/Guardian Signature: _____

Date: _____



2017-2018 Crown Club Application

Page 3

Please complete form and mail or email with two(2) letters of recommendation by August 21, 2017 to: _____

Kim French
Junior Auxiliary of Jonesboro
Crown Club Advisor
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127 CR 4281
Jonesboro AR 72404