

APPLICATION FOR MEMBERSHIP IN CHARMS, INCORPORATED

Name:	
Name of spouse/signific	ant other:
Address:	
Phone:	Cell/Home:
Email:	
Occupation:	
What motivated your in	terest in Charms, Inc.?
Are you willing to atten	d national meetings?
Yes	0 🗆
	of which you are a member. If you hold or have held ganizations, indicate office.

Briefly list skills you possess which would be an asset to this	s organization:
Hobbies and special interest(s):	
Birthdate:	
Names and ages of children:	
(Signature)	(Date)
(Signature of Local President)	(Date)
(Chapter)	