

## 2017 SUPPORTER APPLICATION

Applicant Information							
Full Name:							
1 tallic.	First			Last			
Address:							
_	Street Address						Apartment/Unit #
_	City					State	ZIP Code
Home/Office	Phone: ( )	-	_ Cell N	Number:		) -	
Email:							
	_						
Payment Information							
Please select	payment type:  Card (list below)  o on Card:			ly known speaker  Check (enclosed)  Card Type: □Visa  Expiration Date:			SSV
Other Information							
Meetings are M	5:30 Cocktails 6:00 Welcome/D 6:25 Club Annou 6:30 Scholastic S	ning at 5:30 p.m. a  pinner Served incements student(s) of the Modent(s) of the Moreaker	t Mobile		ort Blvd	l, Mobile, 1	Alabama.

Please mail payment and completed application to: C Spire  $1^{st}$  & 10 Club

C Spire 1<sup>st</sup> & 10 Club 1000 Hillcrest Road, Ste 115 Mobile, AL 36695