

Fort Bend Junior Service League
2011-2012 Provisional Member Profile Form

Directory Information

The information provided below will be published in the FBJSL Membership Directory only.

Provisional Name & Prefix (circle one): Miss Ms. Mrs. Dr. Honorable

_____ (First) (Maiden) (Last)

Provisional Name (as you would like it to appear on your name tag): _____

Spouse's Name & Prefix (circle one): Mr. Dr. Honorable _____

Address: _____ City: _____ Zip Code: _____

Home Phone: _____ Work: _____ Cell: _____

Email: _____ Birthday: _____

Other Information

Occupation/Employer: _____

Children (Names/Ages): _____

Specialized Skills (i.e. web development, graphic design, photography, etc.): _____

How did you hear about FBJSL? _____ If you were referred by a FBJSL member, please provide their name(s): _____

Placement Request

The following placements are available to Provisionals for the 2011-2012 year. Please indicate your order of preference with a "1", "2", and "3". The Director of Membership will notify you when your placement is finalized.

- | | |
|---|--|
| _____ Charity Ball | _____ Fort Bend Teen Service League Mentor |
| _____ Child Advocates of Fort Bend | _____ Houston Museum of Natural Science – Sugar Land |
| _____ Cookbook | _____ Literacy Council of Fort Bend County |
| _____ East Fort Bend Human Needs Ministry | _____ Memorial Hermann Sugar Land Hospital |
| _____ Fort Bend Comm. Partners Rainbow Room | _____ Sugar Plum Market |
| _____ Fort Bend County Women's Center | _____ No preference, whichever needs more volunteers |
| _____ Fort Bend Seniors | |

If you have special talents, qualities, or experiences that would make one placement better for you than another, or if you have circumstances that would prohibit you from serving on a certain placement, please explain in the space provided. We will try to accommodate your needs; however, we offer no guarantees. _____

Payment Information

Payment: _____ \$100 Dues _____ \$50 Registration Fee Total Payment: \$ _____

Payment Method: Cash _____ Check# _____ Mastercard _____ Visa _____ AMEX _____

Credit Card No. _____ Exp. Date _____ Signature: _____

If paying by credit card a \$2.00 convenience fee will be assessed.

Please return this form with payment to:

Fort Bend Junior Service League • Attn: Provisional Director
P. O. Box 17387 • Sugar Land, Texas 77496 • Phone: 281-636-6272 • Fax: 713-559-8363

Original: Treasurer Yellow: Director of Membership Pink: Director of Provisionals Gold: Member

