

HONORABLE ORDER OF THE BLUE GOOSE INTERNATIONAL MEMBERSHIP APPLICATION

SUBMIT WITH A \$50 CHECK MADE PAYABLE TO NATIONAL CAPITAL POND

NEW MEMBERSHIP _____ REINSTATEMENT _____ FLIGHT _____

APPLICANT INFORMATION

Last Name:		First Name:		Date:	
Date of birth:		Cell Phone:		Home Phone:	
Current address:				Email:	
City:		State:		ZIP Code:	

EMPLOYMENT INFORMATION

Current employer:					
Employer address:					
Phone:		Cell:		Fax:	
City:		State:		ZIP Code:	
Position:		E-Mail:			

HAVE YOU EVER BEEN A MEMBER OF ANOTHER POND? YES _____ NO _____

If yes, where:		Flight to:		Pond from:	
Paid dues for the fiscal year ending:		If Officer position held:		Dates:	

NEW MEMBER VOUCHER FOR BY THREE GANDERS

Print Name:		Date:	
Signature:			
Print Name:		Date:	
Signature:			
Print Name:		Date:	
Signature:			

APPLICANTS SIGNATURE:	Date:
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Pond Use Only

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Received By:		Date:	
Method of Payment:		Date:	
Wielder's Signature:		Date:	



Mail To: Michelle Fitzwater 2536 Richfield Lane Chesapeake Beach, MD 20732