



### Application for General Membership

Please enter the following information as you would like it to appear on your membership card. Submit the completed application and initial payment of membership fee to the Royal Neighbors of America Home Office at 230 Sixteenth Street, Rock Island, IL 61201-8645. For your records, complete and detach the receipt as proof of payment. General membership for youths ages 0-15 are free.

Check one:  Adult (\$14.95 per year)  Youth (Ages 0-15 are free)

This portion to be completed by the applicant					
Chapter no.	Chapter location (City or Town)		(State)	Mailing address of applicant (incl. zip code)	
Name of applicant	(Last name)	(First name)	(Middle name)	Social Security no.	
Date of birth (Mo.)	(Day)	(Year)	Sex	<input type="checkbox"/> Male <input type="checkbox"/> Female	Phone number (incl. area code) E-mail address
How did you learn about us? <input type="checkbox"/> Local chapter <input type="checkbox"/> Agent <input type="checkbox"/> Family member/friend <input type="checkbox"/> Corporate Web site <input type="checkbox"/> Advertisement <input type="checkbox"/> Other (Please specify)_____					

As an adult member, I agree to uphold the principles of Faith, Unselfishness, Courage, Endurance, and Humility on which Royal Neighbors of America was founded more than 100 years ago.

\_\_\_\_\_  
Signature of adult applicant

I am applying for youth general membership on behalf of the youth applicant.

\_\_\_\_\_  
Signature of parent or guardian

This portion for office use only					
Chapter no.	Chapter location (City or Town)		(State)	Mailing address of applicant (incl. zip code)	
Name of applicant	(Last name)	(First name)	(Middle name)	Social Security no.	
Date of birth (Mo.)	(Day)	(Year)	Sex	<input type="checkbox"/> Male <input type="checkbox"/> Female	Phone number (incl. area code) E-mail address
How did you learn about us? <input type="checkbox"/> Local chapter <input type="checkbox"/> Agent <input type="checkbox"/> Family member/friend <input type="checkbox"/> Corporate Web site <input type="checkbox"/> Advertisement <input type="checkbox"/> Other (Please specify)_____					

BP 120-A; Rev. 5-2008

**Do not fill in or detach this receipt unless a payment is received with the application**

Royal Neighbors of America  
Rock Island, IL

Received of \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_  
(Name of applicant)

the sum of \_\_\_\_\_ dollars (\$ \_\_\_\_\_) in connection with  
an application for general membership in Royal Neighbors and chapter no. \_\_\_\_\_  
located at \_\_\_\_\_.