

LADIES AUXILIARY TO THE YUKON ORDER OF PIONEERS



APPLICATION Form

I,(Print name in full) do hereby make application to be admitted to membership in the Auxiliary of the Yukon Order of Pioneers.

I have resided within the boundaries of Yukon twenty (20) years before the date of this application and I hereby declare that I have never performed an act or deed which would exclude me joining any honourable Auxiliary.

I arrived at..... about (date)

Date of Birth
(Month) (Day) (Year)

Maiden NamePhone.....

Mailing Address

.....
.....

(Including Postal Code)

Signature

RECOMMENDING MEMBERS

We, members in good standing of the Auxiliary do hereby certify that the above mentioned applicant was within the boundaries of the Yukon at least twenty years prior to the date of this application and we recommend that she be admitted to the Auxiliary.

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FEES & DUES

This application must be accompanied by an initiation fee of \$ 20.00, plus annual dues of \$ 20.00.

MEETINGS

The meetings are held the third Monday of each month at 7:00 PM at the Golden Age Society unless otherwise notified.

Date of Ballot