

APPLICATION FOR LIFE MEMBERSHIP



Approved \_\_\_\_\_ by  
Executive Administrator

APPLICATION FOR LIFE MEMBERSHIP

The \_\_\_\_\_ of \_\_\_\_\_  
Please type/write or print Lions Club Name City/State/Postcode Country

Chartered \_\_\_\_\_ recommends approval of a Life Membership for  
Date

Lion \_\_\_\_\_  
First Name Middle Name Last Name

Age \_\_\_\_\_ Date became a Lion \_\_\_\_\_  
Date Member Number

This Lion has maintained \_\_\_\_\_ years of ACTIVE membership in this Club.

(If he/she has held membership elsewhere, give name of Club or Clubs and term of membership in each.  
Provide this information on reverse side of page.)

The highest following position he/she held in Lionism \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Explain some accomplishments of this Lion in behalf of the community and to Lionism in general. (Use reverse side if more space is needed.)

The above information is being submitted with the full understanding of the following requirements for Life Membership. Any member of a club who has maintained Active membership as a Lion for twenty (20) or more years and has rendered outstanding service to his/her club, his/her community, or this Association; or any member of a club who has maintained such Active membership for fifteen (15) or more years and is at least seventy (70) years of age; or any member of a club who is critically ill may be granted Life Membership in the local club upon (1) recommendation of his/her club, (2) payment to the Association of US\$300.00, or its equivalent in the respective national currency, by his/her club in lieu of all future dues to the Association, and (3) approval by the International Board of Directors.

NOTE: PLEASE ALLOW AT LEAST 8 WEEKS FOR DELIVERY OF PERSONALIZED LIFE MEMBERSHIP CERTIFICATE AND SILVER LIFE MEMBERSHIP CARD.

PAYMENT FOR LIFE MEMBERSHIP MUST ACCOMPANY THE APPLICATION FORM BEFORE WE CAN PRESENT FOR FORMAL APPROVAL.

This Life Membership was approved by our Club Board of Directors on \_\_\_\_\_

Signed \_\_\_\_\_  
Club President Club Secretary

Date \_\_\_\_\_ Certificate and wallet card will be sent to the SECRETARY

Club Number \_\_\_\_\_ District \_\_\_\_\_ Phone No. \_\_\_\_\_