

# Florida Association of Majority and Alumni Application Form

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-mail address \_\_\_\_\_

Former Assembly \_\_\_\_\_

Current Assembly (if working with one) \_\_\_\_\_

Please check all that apply:

\_\_\_\_\_ PWA

\_\_\_\_\_ Past Grand Officer - Please list titles and the years below

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Grand Cross

\_\_\_\_\_ OES/Amaranth

\_\_\_\_\_ Member of Supreme Assembly Alumni Association

- Fill out the form and enclose a check made payable to Grand Assembly of Florida
- Mail or hand deliver to Kathi Latimer, P.O. Box 306, Lake Hamilton, Florida 33851
- Any questions? Call Kathi @863-439-2182 or email:KBLgator@aol.com

(This has been approved by Mom J.)