

Returning Member Application



PERSONAL INFORMATION

- Please check:
- I am a matriculated student at the College of New Jersey
 - Check here if your information can be included in our member directory

Name: _____ Class Year: _____

Local Address (on- or off-campus): _____

Contact Phone: _____ Screen name: _____

TCNJ E-mail: _____ Date of Birth: _____

EMERGENCY CONTACT INFORMATION

Please provide us with someone we can call in case of an emergency

Name: _____

Address: _____

Phone: _____ Alternate Phone: _____

CERTIFICATIONS

Please give us the type and expiration of any certifications you may already have

_____ Expires: _____

_____ Expires: _____

_____ Expires: _____

ESSAY: On the back of this paper, briefly explain why you are returning to Lions' EMS and your thoughts and feelings on the organization. Are we heading in a positive direction? Is this what you expected when you joined? What would you change? Do you have any ideas about the upcoming year? Please take this seriously as we need your feedback to help improve the organization.

To complete your application, please submit a \$10 application fee, which will be used for your uniform shirt. If you already have a shirt and do not want another, do not submit payment. Checks should be made payable to The College of New Jersey- Lions' EMS. Should you miss the application deadline, there will be another one in the Spring Semester. Check out our website www.tcnj.edu/~lionsems for details.

Signature Date

Shirt Size: _____