

**Wolverine Chapter Clinton Township MI #1332  
Chapter Officer Application**



**Contact Information**

Name		
Street Address		
City ST ZIP Code		
Phone		
E-Mail Address		
Today's Date:	Position you are applying for?	
Year joined Chapter?	H.O.G.® Number:	

**Chapter Experience - Summarize participation in helping out with Chapter Events and/or Chapter Committees**

**Previous Volunteer Experience - Summarize your previous volunteer experience outside the Chapter**

**Special Skills or Qualifications - Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports**

**Why would you like to fulfill this position?**

Signed: \_\_\_\_\_

You may complete the form on your PC, print it and deliver to the Chapter Director or fax to (586)752-3221.  
Or you may complete the form on your PC, sign it by clicking the 'Sign' button in Adobe Reader, save to your hard drive, then attach the file to an email and send to [director@wolverinehog.com](mailto:director@wolverinehog.com)