

THE JUNIOR LEAGUE OF CORPUS CHRISTI
CANDIDATE & SPONSOR INFORMATION SHEET

NAME: _____

ADDRESS: _____

HOME PHONE: _____ WORK PHONE: _____

EMAIL ADDRESS: _____ ALTERNATE EMAIL: _____

DATE OF BIRTH: _____

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

POSITION HELD: _____

MAIDEN NAME: _____ HUSBAND'S NAME: _____

LENGTH OF RESIDENCY: _____

PROPOSAL GROUP

(At least 2 members of the Proposal Group must be Active members;
one Active must be designated the "Contact Sponsor")

Primary Sponsors (Two required):

NAME: _____

ADDRESS: _____

ZIP CODE: _____

PHONE: _____

SIGNATURE: _____

NAME: _____

ADDRESS: _____

ZIP CODE: _____

PHONE: _____

SIGNATURE: _____

Secondary Sponsor(s): (One required):

NAME: _____

ADDRESS: _____

ZIP CODE: _____

PHONE: _____

SIGNATURE: _____

NAME: _____

ADDRESS: _____

ZIP CODE: _____

PHONE: _____

SIGNATURE: _____

SUBMISSION DEADLINE:

Resident: THE DAY BEFORE THE JLCC MARCH GENERAL MEETING

Non-Resident: December 1 of proposal year

Submit To:

Provisional Chairman

The Junior League of Corpus Christi, Inc.

123 N. Carrizo, Corpus Christi, Texas 78401

(361) 884-3000 phone | (361) 884-3552 fax