

BLUE STAR MOTHERS OF AMERICA, INC BIG DIPPER AUXILIARY MEMBERSHIP APPLICATION/RENEWAL 2024-2025



NAME:			
ADDRESS:			
CITY:		STATE:ZIP:	
PHONE:	EMAIL:		
CHAPTER STATE & NO:		DEPARTMENT: N/A	

\*\* If you belong to the Department of Michigan or the Department of Ohio, please send your membership form to your Department Big Dipper Financial Secretary\*\*

Send form and check for \$10.00 payable to the order of: "Big Dipper Auxiliary" to

Big Dipper Financial Secretary-Alethea Tennill P.O. Box 313 Columbia MO 65205

OR

If paying through PayPal, please fill out this form and email it to <u>finsec.bd@bluestarmothers.us</u>

For Big Dipper Use O	nly: ↓		
Amount Paid:		Processed:	
Method of Payment:	Check Check #	Deposited:	
	Card Last 4 Digits on Card		
	Cash		