

**100**  
**BLACK MEN**  
OF METRO BATON ROUGE, LTD.

**Membership Application**  
**(Please Print or Type)**

Name \_\_\_\_\_  
Last First Middle

Home Address \_\_\_\_\_  
Street/Mailing City/State Zip

Date of Birth \_\_\_\_\_ S.S. # \_\_\_\_\_ Registered Voter: Yes \_\_\_\_\_ No \_\_\_\_\_

Home Telephone \_\_\_\_\_ Fax Phone \_\_\_\_\_

E-mail \_\_\_\_\_ Cell Phone \_\_\_\_\_

Resident of Baton Rouge \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Years of Residency \_\_\_\_\_

Place of Employment \_\_\_\_\_ Retired \_\_\_\_\_

Address \_\_\_\_\_

Work Phone \_\_\_\_\_ Fax \_\_\_\_\_

Occupation/Job Title \_\_\_\_\_

Community/Professional Affiliations: \_\_\_\_\_

Indicate your skills/talents area  
\_\_\_\_\_ Fundraising \_\_\_\_\_ Info. Technology \_\_\_\_\_ Marketing  
\_\_\_\_\_ Writing/Editing \_\_\_\_\_ Organizing \_\_\_\_\_ Other \_\_\_\_\_

**Applicant MUST attach a typewritten statement to include the following:**

1. Why do you want to join the organization of 100 Black Men?
2. What can you contribute to the organization of 100 Black Men?

An application fee of **\$476.00** is required with the completed application and an interview of the applicant will be required. By signing below, I attest to the truthfulness of all information listed on this application and I authorize 100 Black Men of Metro Baton Rouge to obtain any information regarding my legal/criminal history necessary for membership.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date of Application

\_\_\_\_\_  
Sponsor's Signature

\_\_\_\_\_  
Date Received

*Application should be returned by mail to the address listed below. For more information, you may contact the Office of the 100 (356-9444)*

**Do not write below this line for office use only**

**Membership Committee Action**

**Board Action**

Approved \_\_\_\_\_ Date \_\_\_\_\_

Approved \_\_\_\_\_ Date \_\_\_\_\_

Denied \_\_\_\_\_ Date \_\_\_\_\_

Denied \_\_\_\_\_ Date \_\_\_\_\_