



MCOTC MEMBERSHIP RECORD FOR CANDIDATES

Candidate's Name: _____

Date: _____ (Requirements must be fulfilled within 9 months)

PART I: ATTENDANCE AT 4 CLUB FUNCTIONS

1. Meeting of: _____
2. Meeting of: _____
3. _____
4. _____

PART II: PERFORMANCE OF 2 HOURS OF CLUB SERVICE:

1. _____
2. _____

Candidate's Signature: _____

Note: Please return this fulfilled information to the Club President:

Emily Scott - President
mcotc.info@gmail.com