



2025 – 2026 Enrollment Form Fleming County Extension Homemakers

Yearly Dues: \$10.00

Please make checks out to: Fleming County Homemakers

(Dues \$9 + \$1 contributed to KY Ovarian Cancer Research Fund)

First Name:	-7 ₀ ,	Mid <mark>dle</mark> Initial:	_ Last Name:	
Club Name: 🗆	(F)	Address:	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	
or	□ Mailbox Member	_		
Email:			A Dank	
Sex: Female	□ Male	KEHAX		
Home Phone:			Cell Phone:	
Work Phone:	man of	u.	Fax Number:	6.
_		Black Hispanic As	The second secon	
Age Group (Check ☐ 15-19 ☐ 20		Enrollment Type:	New Member	
\Box 15-19 \Box 26 \Box 25-34 \Box 35		Number of Years in Clu		
□ 45-54 □ 55	5-64			
□ 65-74 □ 7 5	j+			
I (print, full Name)		aries and Kentucky Eytensi	hereby grant permission to the University of on Homemakers Association, Inc. to	
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		mentioned images in educa	ational and promotional activities and	
publications witho	ut compensation.			
Signature:			Date:	
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