100

BLACK MEN OF UPSTATE SC, INC.

Membership Application

Personal Information						
Full Name:				Date:		
	Last	First		М.І.	-	
Address:						
	Street Address				Apartment/Unit#	
	City			State	ZIP Code	
Phone:			Email			
Status	Married 🗌] Single 🗌 Divo	rced 🗌			
		Employme	nt Information			
Employer:						
Title / Posit	ion:					
Educational Information						
Educationa	Background:					
Professiona	I Affiliations:					
Civic/Social	Organizational Aff	iliations.				
	organizationar					
Hobbies and	d Leisure Activities	:				
		Characto	r References	_		
Name:		Phone:	Em	ail:		
Name:		Phone:	Em			
Name:		Phone:	Em			
Which if any of the below skills / experience do you have						
	rs & Technology	Marketing & Communications	Writing / Editing	_	l Events	
	rs & Technology	Marketing & Communications Other	Writing / Editing	⊔ Strateg	jic Planning	
		Oulei				