

## PERSONAL INFORMATION

Full Name : \_\_\_\_\_

Address : \_\_\_\_\_

Phone Number : \_\_\_\_\_

Email Address : \_\_\_\_\_

Birthday : \_\_\_\_\_

Referred By : \_\_\_\_\_

\_\_\_\_\_ I am at least 60 years of age.

\_\_\_\_\_ I understand my membership is for one year. The cost is \$150.00

\_\_\_\_\_ I understand, there is a one time registration fee of \$25.00, for a total of \$175.00 for the first year.

\_\_\_\_\_ I understand, I am not able to promote a business with this membership level. If I decide to promote a business, I will need to upgrade to a full member of LBB, by paying the difference in membership levels.

\_\_\_\_\_ I understand, my application automatically renews. I will receive an invoice each year.

\_\_\_\_\_ I have read & I understand the terms and conditions at <https://www.womenoflbb.com/join-lbb.html>.

## OFFICE USE ONLY

Date : \_\_\_\_\_ Membership Type : \_\_\_\_\_

Membership Number : \_\_\_\_\_ Payment Type : \_\_\_\_\_

**Please send your check for \$175.00 made out to Women of LBB.**

📍 1600 Mid Rivers Mall Dr, St Peters, MO 63376

✉ [connect@womenoflbb.com](mailto:connect@womenoflbb.com)

🌐 <https://www.womenoflbb.com/>

**THANK YOU FOR JOINING THE WOMEN OF  
LBB'S ENCORE CHAPTER.**