

**YOUTH SPONSORSHIP
ENTRY FORM**

APPLICANT INFORMATION

(please print)

NAME: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

YOUTH ORGANIZATION: _____

YOUTH ORGANIZATION ADDRESS: _____

Signature _____

MEMBER INFORMATION

(please print)

NAME: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

TELEPHONE NUMBER: _____

WORK LOCATION: _____

I am a member in good standing of CWA, Local 9588.

Member's signature: _____