

2024 Hutcherson Flying Queens Foundation (HFQF) Membership Application

Dues for 2024 - \$50.00: *Your dues support the current Flying Queens program and help offset Foundation operating costs.

Membership Levels: Check the applicable level based on your eligibility Check here if you are [] a new member or [] a renewing member

- [] Foundation Voting Members: All former Flying Queens and Queen Bees, coaches and their spouses, team managers, and trainers and all members of the Claude Hutcherson extended family. These members can vote at the annual meeting and are eligible to serve on the Board.
- [] Recent Graduate Member: All current Flying Queens, team managers, and trainers for whom membership dues are waived for the first five years following graduation from Wayland. Recent Graduate Members can vote at the annual meeting during this five-year period.
- [] Foundation Associates: Friends/supporters of the Flying Queens. These members are encouraged to play an active role but are not eligible to vote or serve on the Board.

Circle your affiliation: Flying Queen Queen Bee Coach/Spouse Team Staff Hutcherson family Friend/Supporter

Contact Information

<u>Renewing members</u>: only your name is required, but if any information below has changed, please update it.

Name (First and Last):	Maiden Name: (if applicable0	
Years attended WBU:	(xxxx – xxxx) (if applicable)	
Email:	Phone:	[]Cell [] Home
Address:		
City:	State:	Zip Code:
HFQF communications prefere	nce: (Please circle one)Email or Pape	er
1) Mail application and che Volente, TX 78641.	eck to Sheri Knesek, HFQF Associate T	reasurer, 15844 Ray Vista St.,

- 2) Make check payable to HFQF with "member dues "on the memo line and mail with application to Sheri Knesek. *Recent Graduate Members are exempt from this step for 5 years after graduation.*
- 3) Dues envelope must be postmarked by January 31, 2024 to be certified as a member for 2024.

Do not write below this line.

Secretary Certification: []Foundation Voting Member [] Recent Graduate Member []Foundation Associate

Signature of HFQF Secretary:_____

Date:_____