

2024 SUPPORTER APPLICATION

Full Name:						
	First			Last		
Address:						
	Street Addr	ess				Apartment/Unit #
	City				State	ZIP Code
Home/Office	e Phone:	() -	Cell Number:() -	
Email:				Payment Information		
	\$100): Inc	udes 4 D		Payment Information		
Supporter (Please selec	\$100): Incl t payment t	udes 4 E	Dinner meetings	Payment Information	er	

Other Information

Meetings begin Monday, August 19th at 5:30 p.m. at Moe's Original BBQ, 701 Springhill Avenue, Mobile, Alabama

Meeting agenda:

5:30 Cocktails

6:00 Welcome/Dinner Served

6:25 Club Announcements

6:30 Team Focus Member of the Month 6:40 Athletic Student(s) of the Month

6:50 Keynote Speaker

7:15 Speaker Q&A

Please mail payment and completed application to:

1st & 10 Club

1000 Hillcrest Road, Ste 115

Mobile, AL 36695