



DATE OF APPLICATION

Application for GOOD SAMARITAN FELLOWSHIP

Attached:

- Check for \$500.00
 - Partial payment of \$_____*
 - Documentation of donated item(s) purchased/owned by the Lions Club or Members making this application which were sold by LCF for \$500 or more*
- Memorial Donation Progressive Fellowship
 Yes No Yes No

* Payments and/or donations to be credited toward a Good Samaritan Fellowship must not exceed 3 calendar years from date of application.

NAME OF RECIPIENT (AS IT IS TO APPEAR ON THE PLAQUE) PLEASE PRINT OR TYPE

NAME OF RECIPIENT AS IT IS TO APPEAR ON THE PLAQUE

NAME OF RECIPIENT

NAME OF SPONSORING CLUB/LION

NAME AND ADDRESS OF CLUB SECRETARY OR PERSON TO WHOM PLAQUE IS TO BE SENT

NAME

ADDRESS

CITY	STATE	ZIP
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SIGNATURE Club Secretary Club President

TELEPHONE NO.	FAX NO.	EMAIL ADDRESS
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DATE BY WHICH AWARD MUST BE RECEIVED **(PLEASE ALLOW 30 DAYS FOR PROCESSING)**

NOTE: The plaque will be ordered & sent to address above AFTER receipt of \$500.00.

**To expedite application, EMAIL completed form to: Lion Barbara Senecal at fallonbarb@aol.com
AND**

Mail check for \$500.00 to: Lion Barbara Senecal, 4241 Manchester Rd., Portsmouth, VA 23703

OR

Mail completed form with \$500.00 check to: Lion Barbara Senecal, 4241 Manchester Rd., Portsmouth, VA 23703