Legion of Young Polish Women
Women With A Cause

MEMBERSHIP & COMPLIANCE FORM

It is time to submit your membership form for the upcoming year. We are encouraging you to take advantage of processing your membership electronically by:

1. Visiting our website and completing the form on-line: https://lypw.org/membership-renewal/ ; **or**
2. Completing the form below and returning it to contact@lypw.org or to the address below. Please make the check to **Legion of Young Polish Women** and mail to:

   Legion of Young Polish Women
   c/o Membership
   P.O. Box 56-110
   Chicago, Illinois. 60656

The annual dues are **$ 40.00** for the period of October 1, 2026 through September 30, 2027.
Please submit form and dues by October 1, 2026.

1. MEMBERSHIP STATUS & CONTACT INFORMATION

Membership Type:

☑ New Member ☐ Renewing Member

Contact

First Name: _____
Last Name: _____
Maiden Name: _____
Spouse Full Name: _____
Street Address: _____
City: _____ State: _____ Zip code: _____
Email: _____ Cellphone: _____

Other

Year Presented if Past Debutante: _____ ☐ Queen ☐ 1st Runner Up ☐ 2nd Runner up

Birthdate: _____/_____

Interests

Tell us which areas you are interested in volunteering:

☐ Planning Events ☐ Board Participation ☐ Liaison with other organizations

☐ Committee Participation ☐ Others, please specify: _____

2. AFFILIATIONS & DUAL-LOYALTY DISCLOSURE

To ensure compliance with our Conflict of Interest policies, please list any other organizations, non-profits, or boards you belong to, along with any positions held.

☐ No other affiliations to report

☐ Serve or hold membership in the following organizations:

1. Organization: _____ Position: _____
2. Organization: _____ Position: _____
3. Organization: _____ Position: _____

3. POLICY ACKNOWLEDGMENTS & COMPLIANCE

Please read and initial next to each section to confirm your understanding and agreement.

- _____ Conflict of Interest & Dual-Loyalty: I agree to disclose any personal, professional, or financial interests that may conflict with my duties. In the event of a board-determined infraction or policy violation, I agree that I will not engage in any form of retaliation against LEGION, the board, or any individual member.
- _____ Confidentiality Policy: I promise to maintain the absolute privacy of all non-public information, including organization financials, proprietary data, Debutante profiles, and the membership database.
- _____ Member Code of Ethics: I agree to uphold the highest standards of integrity, respect, and professional behavior as outlined in LEGION's guidelines.

4. GOVERNANCE & LEGAL AGREEMENTS

Please check the boxes below to signify your legal consent.

☐ Constitutional Adherence: I hereby certify that I have read, understand, and agree to abide by the organization's Constitution, Bylaws, and all established Standard Operating Procedures and Policies.

☐ Media & Photo Release: By attending any LEGION event or meeting, I grant permission to LEGION to use my image, likeness, or voice in LEGION marketing, promotional and educational purposes.

5. ATTESTATION & SIGNATURE

By signing below, I certify that all information provided is accurate and that I agree to all terms initialized above.

Member Signature: _____ Printed Name: _____
Date: _____ / _____ / 2026

Parental or Legal Guardian Consent (For members under 18 years old)
Parent/Guardian Signature: _____ Printed Name: _____
Date: _____ / _____ / 2026

For Office Use Only

Date Membership fee received: _____ Received by: _____
Name & Position

Payment Method: ☐ Check # ☐ Cash ☐ Credit Card (online order)