



The Florida Commodores Association

Honorary Membership Nomination

The _____ Chapter of FCA hereby nominates

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email address: _____

for Honorary Membership in the Florida Commodores Association. This Chapter offers the following statement in support of this nomination (**attach documentation to this form**):

Signature of Chapter President: _____ Date: _____

Completed Form and **Documentation** should be sent to:

Florida Commodores Association
P.O. Box 488, Shalimar FL 32579

Approved by:

FCA Executive Committee: _____ Date: _____

Comments:

