

**EARL COLLIER POST 153  
410 E DENNIS  
OLATHE, KANSAS 66061**

**KANSAS LIFE MEMBERSHIP APPLICATION**

Any Increase in Post, Department or National dues must be absorbed or paid by the participant, but may be absorbed or paid by Earl Collier Post 153 at the discretion of the post. Participants may “upgrade” their Kansas Life Membership by using the rate table below.

**KANSAS LIFE MEMBER RATE TABLE**

<u>AGE GROUP</u>	<u>TIMES ANNUAL DUES</u>	<u>X \$30.00 =</u>
18 Through 40	16	\$480.00
41 Through 60	14	\$420.00
61 Through 70	10	\$300.00
71 And Up	7	\$210.00

All questions below must be answered and total remittance must accompany this application.

**Please print or type**

Name \_\_\_\_\_ Age \_\_\_\_\_ Member ID # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ e-mail address \_\_\_\_\_

Total amount of Kansas Life Membership (from chart above) \$ \_\_\_\_\_

Less amount of current years dues (if paid) include photocopy of dues card \$ \_\_\_\_\_

Total amount enclosed \$ \_\_\_\_\_

I have read this application in its entirety and agree to its terms, including that I or the member for whom this membership is being purchased will be responsible for any dues increase not absorbed or paid by Earl Collier Post 153.

\_\_\_\_\_  
Signature of Applicant, Member or Both