

PAST PRESIDENT'S PIN REQUEST FORM

Shag Club Name: _____

Shag Club Address: _____

City, State, Zip: _____

Past President's Name: _____

List the Year(s) Served as President: _____

Example: 2018 - 2019 (That would be one year of service)

How would you like the years to be listed on the Certificate: _____

Name of person submitting this application:

Please provide your phone number in case of questions:

What address do I mail the completed Certificate and Past President's Pin:

Is there a special meeting or date when you need the Certificate and Pin: Yes or No

If Yes, please list date: _____

Please complete this form and mail to:

Lisa Caveny, ACSC Vice Chairman
1570 The Crossing
Rock Hill, SC 29732

You may also scan completed form and email to: acscvicechairman@gmail.com

Note: A Full Member Shag Club President must have served at least one (1) **full** year term to qualify for a pin. Only one (1) pin will be given to each person, no matter how many years they have served.

