



Application HONORARY LIFE MEMBERSHIP

For Branch use in proposing a member for
Honorary Life Membership

Date ____ / ____ / ____
Mnth Day Year

To: State Board Of Directors, Sons In Retirement, Inc.

From: Branch Executive Committee

Through: Area Governor and Regional Director

The Executive Committee of Branch No. ____ hereby submits this application to have an
Honorary Life Membership conferred upon Sir * _____.

This action, duly entered in the minutes of the committee, was considered and approved by a two-
thirds vote at its meeting on ____ / ____ / ____
Mnth Day Year

The proposed Honorary Life Member has been an active member for five or more years and,
during that time has performed outstanding and exceptional service in furtherance of the purposes and
objectives of Sons In Retirement, Incorporated. The specific facts concerning his activities which the
Branch Executive Committee considers sufficient to justify the granting of this honor are set forth on
separate page(s) which are attached. This, and any other supporting documents are to be signed with
the author's signature, printed name and position in SIR.

There are now ____ Active members in this Branch. Of these, there are now ____ Honorary
Life Members. Approval of this application will not result in the number of Honorary Life Members in
this Branch (whose Honorary life membership has been initiated by the Branch) being more than two if
less than 100 active members or more than two percent of the total active membership of the Branch if
100 or more active members.

Respectfully submitted,

Signed Big Sir or Branch Secretary _____
Printed Name Signature

Approved: _____ Governor, Area ____ Date ____ / ____ / ____.

Approved: _____ Director, Region ____ Date ____ / ____ / ____.

Approved: _____ President Date ____ / ____ / ____.

Forwarded to Certificates Chairman:

on ____ / ____ / ____ Recv'd ____ / ____ / ____ Mailed ____ / ____ / ____.

* Use member's full name including middle initial, if available. Nicknames are to be avoided. Please
provide member's personal information (address, telephone number etc.) using page 2 of this form.

(Over)



Application **HONORARY LIFE MEMBERSHIP**

Proposed Honorary Life Member's personal information

Name: _____
First
Middle Initial
(If any)
Last
Title
(Jr., MD...)
Nick Name

Address: _____
Street or PO Box
City
Zip

Wife: _____ Telephone: _____ Email: _____

Joined Date: / / Birth Date: / /
Mnth Day Year Mnth Day Year

Main points for filling out Honorary Life Membership Application

- ★ Applicant should have made improvements for the betterment of the Branch.
- ★ Applicant needs to have clearly earned this award over at least a five year period.
- ★ A table has been added to make it easier for you to list the dates of the important work your applicant has accomplished. This will augment your cover letter. Remember accomplishments in his personal life and with other organizations should **not** be included.
- ★ The application needs to be filled out and **sent to the Area Governor** for his consideration. He will forward it to the Regional Director and then to the President for final determination. Questions can come up along this route and the application may be returned to the Branch for correcting.
- ★ The Honorary Life Member award is signed by our President. It is his responsibility to make the presentation. He will designate who will take his place if he is unable to attend your function. It is the branch's responsibility to inform him of the date the award is to be presented.

HLM Extra Data	Dates
Proposed Awarding Date of Certificate	
Branch positions held and dates	
Contributions to the Branch and dates	
Other	

RULE 180. The Secretary of the current Branch of an Honorary Life Member is responsible to notify the State Secretary and the State HLM Chairman of the transfer, death, resignation and any change of address, telephone number or email address of that HLM member.
 (Moved from Rule 29.2 and Revised 11/16/04)