



## LOUISIANA LIONS EYE FOUNDATION

2020 Gravier Street, Suite B New Orleans, LA 70112

Phone: 504-525-7235 Email: lalioneyes@bellsouth.net



I/we would like to hereby provide a membership in the Louisiana Lions Eye Foundation to:

X \_\_\_\_\_

Name of Lion/person applying for membership

_____ Life Membership .....	\$	100.00
_____ Silver Membership .....	\$	300.00
_____ Gold Membership .....	\$	500.00
_____ Knight of Sight Progressive ..... White Stone .....	\$	1,000.00
_____ Knight of Sight Progressive ..... Red Stone .....	\$	2,000.00
_____ Knight of Sight Progressive ..... Blue Stone .....	\$	3,000.00
_____ Imperial Knight ..... Large Plaque .....	\$	5,000.00

X \_\_\_\_\_

Please PRINT the way you would like the name and if any titles to appear.

Club name on plaque: (Check one)      YES      NO

\_\_\_\_\_  
Sponsoring Club

Payment enclosed for the amount of \$ \_\_\_\_\_

Please mail application and payment to the LLEF office, attention Business Manager.  
Please allow 2 to 3 weeks for processing.