

NORTH CAROLINA DIVISION, SCV
DELINQUENT RENEWAL MEMBER

This Form Must Be Used to Report Delinquent Renewal Members to The North Carolina Division. (Submit One Form For Each Delinquent Renewal Member)

Date _____ Camp Number _____

Camp Name _____

Camp Location – City, State _____

Renewing Delinquent Member's SCV ID # _____

Member's Name: _____

Mailing Address: Street or PO Box _____

City, State, Zip _____

Telephone: _____ Email _____

Submitted By: _____ Title _____

*Please make sure that a check for \$15.00 or properly prorated dues is made payable to **NCSCV** for this member's division dues.*

His dues are paid through July 31, 20_____ .

Mail this completed form & check for each renewing Delinquent Member to:

Danny Bolick, Adjutant

3445 Sigmont Dr

Claremont, NC 28610

828 464 1440 day, 828 244 2202 cell

ncdivisionadjutant@gmail.com