

**FOUNDING MEMBERS SPEAKING AWARD AFFIDAVIT  
2017-2018**

**NAME OF APPLICANT:** \_\_\_\_\_

**CLUB NAME:** \_\_\_\_\_

**DISTRICT:** \_\_\_\_ **ZONE:** \_\_\_\_

**STEP 1**

**I certify that this member did win the club speaking competition and he or she has met all of the mandatory requirements of the Founding Members Speaking Award.**

**CLUB PRESIDENT (Print Name):** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **DATE (dd/mm/yyyy):** \_\_\_\_\_

**DATE OF PRESENTATION (dd/mm/yyyy):** \_\_\_\_\_

**STEP 2**

**I certify that this member did win the spring zone speaking competition and he or she has met all of the mandatory requirements of the Founding Members Speaking Award.**

**DEPUTY GOVERNOR (Print Name):** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **DATE (dd/mm/yyyy):** \_\_\_\_\_

**DATE OF SPRING ZONE (dd/mm/yyyy):** \_\_\_\_\_

**STEP 3**

**I certify that this member did win the district speaking competition and he or she has met all of the mandatory requirements of the Founding Members Speaking Award.**

**GOVERNOR (Print Name):** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **DATE (dd/mm/yyyy):** \_\_\_\_\_

**DATE OF DISTRICT CONVENTION (dd/mm/yyyy):** \_\_\_\_\_

***PLEASE SEND SIGNED AFFIDAVIT TO NATIONAL HEADQUARTERS WITHIN 10 DAYS OF DISTRICT CONVENTION.***