

Hot Stiletto Membership Application

Date: ___/___/_____

Full Name: _____

Address: _____

City/ST: _____ Zip: _____

Phone: _____

Email Address: _____

Do you currently volunteer in your community with a charitable organization? Yes ___ No ___

If yes, please indicate the organization and describe your charitable contribution:

Do you utilize any of the following to promote or increase your social networking:

Facebook: Yes ___ No ___ Page Name: _____

Instagram: Yes ___ No ___ Page Name: _____

Twitter Yes ___ No ___ Page Name: _____

Other, Please indicate: _____

Do you currently have a business or personal website? Yes ___ No ___

If yes, please provide address: _____

Signature: _____

Date: _____