

**Service League Of Boys Contract
2016-2017**

To be completed by the member:

I, _____, as a member of the Service League of Boys, understand that membership in this organization comes with the expectation that all meetings shall be attended and 10 hours of service will be provided to approved philanthropies.

Attendance/participation in Service Sunday (first Sunday in May) is mandatory. I also understand that failure to fulfill these requirements may result in termination of my membership.

Signature _____

To be completed by the parent:

I, _____, as a parent of a SLOB member understand that I have responsibilities in maintaining our membership in the Service League of Boys at Staples High School. I am encouraged to attend all meetings and perform 5 hours of service in approved philanthropies. If I do not fulfill my requirements, I understand I jeopardize my son's membership in this organization.

Signature _____

Email (Please print clearly):

Parent _____

Student _____

Please complete this form and return it along with your check for **\$35.00 per son**, payable to Service League of Boys or SLOBS. You can hand it in or mail it to Beth Massoud, 3 Marc Lane, Westport, CT 06880. Scholarships are available to any family for whom this is a hardship. Contact VP of Membership in confidence at beth@bethmassoud.com.