



French Broad Electric
Membership Corporation
 PO Box 9 * Marshall, NC 28753
 (828)649-2051 phone * (828)649-2989 fax



Name: _____
 First Middle Last

Mailing Address: _____
 Street, Route, & P.O. Box City State Zip

Physical Address: _____
 Street City State Zip

County: _____ Congressional District: _____

E-mail Address: _____

Phone: Home #: _____ Cell #: _____

Names of Parents/Guardians: _____
 First Middle Last

Parent's Phone: Home #: _____ Cell #: _____

Are parents/guardians members, employees, directors of French Broad EMC? Yes No

If so, what is the FBEMC account number: _____

Date of Birth: ____/____/____ Age: ____ Grade: ____ Gender: M F

HIGH SCHOOL: _____

Academic honors and recognitions: _____

School activities: _____

Talents, interests, hobbies: _____

*Note: Please return this application, along with your essay, to French Broad EMC, Attn: Paula Seay. Application and Essay must be received by Monday **November 28, 2016.***

"Owned By Those We Serve"