

## **Anderson County Sheriff's Office Explorer Post 2104**



## **Membership Application**

Name:				
Email Address:				
Sex: Race:	Weight:	Eye Color:	Hair Color:	DOB:
SSN:		_		
Driver's License S	tate and Numb	er:		
				Zip:
Phone Number:	F	Employer		
Occupation:				
Current or Last Cor	mpleted Grade/	University		
School Name:				
•	C		minor traffic offenthe charge (s) below	
List any social med	ia accounts and	l handles for each:		
Signature:			Date:	
Signature of Parent o	r Guardian:			
		Parent/legal guard	ian, if applicant is unde	r the age of 18.