APPLICATION - Junior Achievement Award

(This information is confidential)

Applicant Name			
Date of Birth	f Birth Age (as of 12/31/2025)		
Mailing Address			
City	State	Zipcode	
Phone number			
Email Address			
Applicant's Signature		Date	
Rock Club Name			
Name of Junior Leader (if applicab	le)		
I attest to the applicant being a po	uid-up member of the liste	d rock club and NFMS:	
Club President's Printed Name			
Club President's Signature			

Email or mail your SUMMARY and APPLICATION to:

Jennifer Fitch – NFMS Junior Committee Chairman 21148 Old US Hwy 93 Florence, MT 59833 -or-Jfitch2711@yahoo.com

**If you are sending through the mail, please be sure to mail with a postmark by February 15th, 2026.

Thank you!