

# OPTIMIST INTERNATIONAL CERTIFIED TRAINER APPLICATION

**PERSONAL DATA:**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State/Province: \_\_\_\_\_  
 Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_  
 Home phone : \_\_\_\_\_ Home fax: \_\_\_\_\_  
 Work phone: \_\_\_\_\_ Work Fax: \_\_\_\_\_  
 Cell phone: \_\_\_\_\_ Email address: \_\_\_\_\_  
 Profession/occupation: \_\_\_\_\_

**OPTIMISIST DATA:**

Date joined OI: \_\_\_\_\_ Home Club: \_\_\_\_\_ Club No: \_\_\_\_\_

Offices held at District Level	Year	Offices held at International Level	Year
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**OPTIMIST TRAINING HISTORY: (List Club/District/International experience)**

Event	Date
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

(Continue on Reverse if Necessary)

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_



Send to:  
 Optimist International, Attn: Stephanie Monschein  
 4494 Lindell Blvd., St. Louis, MO 63108  
 Fax: 314-735-4106  
 Or  
 314-371-6006

