



**PRELIMINARY MEMBERSHIP APPLICATION
LODGE 1543 HANFORD, CALIFORNIA**



DATE (MM/DD/YYYY): ____ / ____ / ____
Sex: M or F

Last Name Middle First

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

DATE OF BIRTH: ____ / ____ / ____ AGE: ____ PLACE OF BIRTH: _____

ITALIAN DESCENT: Y or N OTHER: _____

SPOUSE: _____ ITALIAN DESCENT : Y or N

YOUR OCCUPATION: _____

YOUR EMPLOYER: _____

HOBBIES: _____

SPONSORED BY: _____
 REGULAR YOUTH
 ASSOCIATE SOCIAL

PHONE: HOME: _____ CELL: _____

EMAIL ADDRESS: _____

SIGNATURE OF APPLICANT

