MODENESE SOCIETY

Established 1906

P.O. Box 245, Highwood, Illinois 60040 modenesesociety.org

modenesesociety@gmail.com

Application For Membership

Date:		
Full Name:		
Address (Street, City, Sta	te, Zip):	
Phone Number:		E-mail:
Date of Birth:	Male:	Female:
Birthplace:		Ancestral Home:
Occupation:		Employer:
Education:		
Names of Parents:		Spouse Name:
Children Names and Age	s:	
Other Activities or Organ	izations:	
MEMBERSHIP TYPE (CHC Regular Social	-	h Benefit:
Required F	ees (For Modenese	Society Use Only)
Welcome to	-	OATH OF MEMBERSHIP ety. Please read and sign the OATH OF MEMBERSHIP:
TO THE MEMBERS OF TH	E SOCIETY AND THE NIZATION. IF I CANN	ETY'S BY-LAWS AND REGULATIONS. I PROMISE LOYAL ASSISTANCE IR FAMILIES AND I SHALL NOT, IN ANY WAY, GO AGAINST THE OT FULFILL MY OBLIGATIONS OF A GOOD AND HONEST MEMBER, ETY WITHOUT HAVING ANY RIGHTS OF APPEAL.
Applicant's Signature:		Date:
Presented By:	Seconded By:	
Officer's Signature:		Date: