Napa Lodge 2043

ORDER
Sons and Daughters of Italy
IN AMERICA®

Return completed form to local Lodge Financial Secretary

Office Use Only:

Batch# _____
Member # _____
Date Reported: _____

Application

Date: _____

_____ _____
Lodge Lodge Number

_____ _____
Last Name First Middle Initial

_____
Address

_____
City State Zip

Male ____ Female ____

_____
Birth Date Age

_____
Occupation

_____
Insurance beneficiary if applicable

Are you or your spouse of Italian descent? yes no

_____
Explain source of Italian descent

_____
Children's Names

Have you ever belonged to another Sons of Italy Lodge? yes no

_____
Reason for termination

Type of Membership

Regular	R
Associate	A
Social	S
Social with insurance	SGB
Junior Social	JRS
Junior with Insurance	JR

(circle one)

Date Iniitated _____

_____
Daytime Phone

_____
Evening Phone

_____
E-Mail Address

Marital Status

married single widowed
(circle one)

_____
Spouse Name

Termination Date _____

_____
Lodge Name

I certify that the applicant is fully eligible for membership & recommend approval.

Sponsor Signature _____ Sponsor Member # _____

I know of no reason why I should not qualify to become a member of this Order.
This application, when accepted in writing by the Grand Lodge of California,
shall constitute a formal contract between the Grand Lodge of California and myself.

I do solemnly declare and promise to accept and respect the principles upon which the Order Sons of Italy in America is based, the laws of the Supreme Lodge, the Grand Lodge, and my Lodge. I promise to be bound by the deliberations of the majority, to obey the orders of the National President, the State President, and the President of my Lodge and support the charitable endeavors of the Order. I promise to obey, uphold and defend the laws and Constitution of the United States.

Signatures

Applicant _____
Grand Officer _____
Financial Secretary _____
Date _____

Payments To Be Made By Applicant

Lodge Admission Fees _____
Mortuary Fund Adm Fees _____
Dues _____
Miscellaneous Fees _____
Total _____