



Maltese American Community Club of Dearborn

5221 Oakman Blvd., Dearborn, Michigan 48126

313-846-7077 | MACCMichigan.com | malteseamericancommunityclub@gmail.com

APPLICATION FOR NEW CLUB MEMBERSHIP

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

EMAIL: _____ PHONE: _____

EMERGENCY CONTACT: _____ PHONE: _____

I hereby apply for membership in the Maltese American Community Club, MACC, of Dearborn, MI.

The function of the MACC is dedicated to spreading awareness, understanding, and appreciation of the Maltese culture, its people, diversity, and values.

I, or my spouse, am of Maltese ancestry. By applying, I am agreeing to follow all rules of the MACC and always maintain good social conduct. Any membership card issued is the property of the MACC and may be revoked for good and sufficient reason. I also agree that I will be on probation for a minimum of 90 days.

I verify that the above information is true.

Signature: _____

Date: _____

The Executive Board will review and approve or decline this application at our next board meeting.

Make checks payable (in the amount of \$30.00 per member) to:

Maltese American Community Club or MACC
5221 Oakman Blvd., Dearborn, MI 48126

**All memberships will expire December 31st of the current calendar year.
NO EXCEPTIONS**

Form of payment (circle one or add check number, do not put credit card information)

cash

check

check # _____

credit card