



APPLICATION FOR MEMBERSHIP
POLISH COMMUNITY CLUB
810 Columbia St., Utica NY 13502

DUES:

___ \$30.00 Individual Membership

___ \$50.00 Family Membership (Kids up to 17 yrs. old)

NAME: _____

ADDRESS: Street _____

City _____ State _____ Zip _____

PHONE: _____ **E-MAIL:** _____

DATE: _____ **SIGNATURE:** _____