



SOKOL KHB ENNIS

APPLICATION FOR ASSOCIATE MEMBERSHIP

(PLEASE PRINT)

*Applicant must be age 17 or older * One person per application * Application must be filled out completely*

First Name	Middle Initial	Last Name	Maiden Name
Street Address		City	State
Home Phone		Cell Phone	Email Address
Date of Birth	Place of Birth (City, State, Country)		Occupation
Spouse's Name	Occupation of Spouse		Children's Names
Other organizations that you are a member of		Volunteer interests	

Are you a U.S. Citizen or Legal Resident (Yes or No)? _____ Do you affirm that you are loyal to the government of the United States of America and that you are not a member of any subversive organization? _____

If admitted to membership in Sokol KHB Ennis, do you promise to abide by its policies and rules, and to be governed by its bylaws in all your activities on behalf of said organization? _____

Select one of the membership levels below:

<input type="checkbox"/> GOLD (American Sokol) \$80 if application date between Nov 1 & Jun 30 \$55 if application date between Jul 1 & Oct 31 \$110 if application date between Jul 1 & Oct 31 & paying for current year & following year (Initial payment includes a \$15 registration fee) <i>\$65 dues must be paid annually by Dec 31</i> <u>Privileges:</u> Clubroom access Hall rentals Sokol KHB Ennis newsletter May attend member meetings but without privilege of voting or holding elected office Swimming Pool access Gym and educational activities & classes (gymnastics, volleyball, fitness, dance, etc.) Eligible for member awards & youth scholarships American Sokol membership & newsletter May serve on committees except those dealing with financial disbursements or property assets Eligible for voting membership & elected office after 6 months	<input type="checkbox"/> SILVER (Social Club) \$45 <i>\$45 dues must be paid annually by Dec 31</i> <u>Privileges:</u> Clubroom access Hall rentals Sokol KHB Ennis newsletter May attend member meetings but without privilege of voting or holding elected office Swimming Pool access	<input type="checkbox"/> BRONZE (Social Club) \$25 <i>\$25 dues must be paid annually by Dec 31</i> <u>Privileges:</u> Clubroom access Hall rentals Sokol KHB Ennis newsletter May attend member meetings but without privilege of voting or holding elected office
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Amount paid: \$ _____ Method of payment (select one): Check Cash Online

AGREEMENT – All members must pay required dues and fees, be a U.S. citizen or legal resident, demonstrate good character and habits, have an appreciation of Czech, Slovak and Slavonic culture and heritage, observe the directives and policies of Sokol KHB Ennis, be responsible for their guests at all times, guard and honor the interest of Sokol KHB Ennis, and uphold Sokol discipline.
 *Gold members must also observe the directives and policies of American Sokol and Southern District and guard and honor their interest.

ACCEPTANCE - If membership is approved, applicant will be mailed a member card and acceptance letter. If declined, applicant will be mailed a decline letter with returned payment. A declined applicant may reapply for membership after 6 months. Applicants may be required to meet with Membership Committee; if so, they will be notified of the date/time of that meeting.

STATEMENT - I affirm that I understand the conditions of membership, that I am loyal to the government of the United States of America, and that I am not a member of any subversive organization. If admitted to membership in Sokol KHB Ennis, I promise to abide by its policies and rules, to support its purpose and goals, and to be governed by its bylaws in all my activities on behalf of said organization.

Signature of Applicant: _____ **Date:** _____

Return completed and signed application with payment (unless paid online) to manager at Sokol Activity Center or mail to:
Sokol KHB Ennis - P.O. Box 205 – Ennis, TX 75120-0205 – Attn: Financial Secretary
 (Make check payable to Sokol KHB Ennis)

For more info, visit www.sokolennis.com or email membership@sokolennis.com or call 972-875-7959