



**SYRACUSE TURNERS, INC.**  
619 N. Salina St., Syracuse, NY 13208  
(315) 471-9851

**APPLICATION FOR MEMBERSHIP**

I hereby make application for membership in the Syracuse Turners Society, and if elected, agree to conform to the principles and statutes of the Syracuse Turners as well as the laws and regulations of the American Turners.

**Name (in full)** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

**Home Address** \_\_\_\_\_ **City** \_\_\_\_\_

**State** \_\_\_\_\_ **Zip code** \_\_\_\_\_ **Phone** \_\_\_\_\_ **Email address** \_\_\_\_\_

**Married?** \_\_\_\_\_ **Spouse's name** \_\_\_\_\_ **Are they applying for membership?** \_\_\_\_\_

**Business, Profession, Occupation** \_\_\_\_\_

**Employer** \_\_\_\_\_

**Business Address** \_\_\_\_\_ **Business Phone** \_\_\_\_\_

**Other club affiliations?** \_\_\_\_\_

**Do you have any children under 18 years of age?** \_\_\_\_\_

**Hobbies?** \_\_\_\_\_

Activities I am or my spouse would be interested in:

Bowling Leagues: Men's \_\_\_\_\_ Women's \_\_\_\_\_ Mixed \_\_\_\_\_ Youth \_\_\_\_\_

Men's Golf League \_\_\_\_\_ Youth Activities \_\_\_\_\_ Ladies Auxiliary \_\_\_\_\_ Dart League \_\_\_\_\_

Other \_\_\_\_\_ Please list any activities you might be interested in other than what is listed \_\_\_\_\_

**Signature of Applicant** \_\_\_\_\_ **Date** \_\_\_\_\_

**Proposed and Recommended by** \_\_\_\_\_

**Signature of References #1** \_\_\_\_\_ **#2** \_\_\_\_\_

Each applicant must be sponsored by a Turner member and have two additional Turner members as references.

**FIRST YEAR SPECIAL RATE \$40.00!**

**Date Received:** \_\_\_\_\_

**Date Posted on Board** \_\_\_\_\_

**Date Approved by Officers and Board** \_\_\_\_\_