

Application for Membership
San Francisco Italian Athletic Club
1630 Stockton Street, San Francisco, CA 94133
Office: (415) 781-0165 Bar: (415) 781-0166
www.sfiac.org

PLEASE PRINT

DATE: _____

Subject to the bylaws and rules of the San Francisco Italian Athletic Club, I hereby apply for membership in the San Francisco Italian Athletic Club. Please complete entire application.

LAST NAME

FIRST NAME

MIDDLE INITIAL

TELEPHONE NUMBERS:

Home:

Work:

Fax:

Other:

()

()

()

()

EMAIL ADDRESS _____

Would you rather have the SFIAC email your monthly newsletter to you? Yes No

YOUR PRESENT EMPLOYER: _____

YOUR PRESENT OCCUPATION: _____

HOME ADDRESS:

Street: _____

City: _____

State: _____

Zip Code: _____

BIRTHDATE

BIRTHPLACE

U.S. CITIZEN

Yes

No

MARITAL STATUS: Single Married If married, wife's name: _____

FATHER'S NAME: _____

FATHER'S BIRTHPLACE: _____

MOTHER'S MAIDEN NAME: _____

MOTHER'S FATHER'S BIRTHPLACE: _____

LIST HOBBIES AND INTERESTS: _____

AS A MEMBER, WHICH COMMITTEES WILL YOU BE INTERESTED IN JOINING:

Sports Picnic Club Building Social Cultural

Travel Communications Membership Bylaws/Legal Finance

HAVE YOU EVER BEEN CONVICTED OF A FELONY? Yes No

If yes, explain: _____

HAVE YOU EVER APPLIED FOR MEMBERSHIP BEFORE? Yes No

HAVE YOU EVER BEEN A MEMBER BEFORE? Yes No

If so, give details: _____

Give names of at least two (2) SFIAC members you know personally:

Give names of two non-members you have known for at least ten years and their addresses and telephone numbers:

NAME	ADDRESS	TELEPHONE NO.
_____	_____	()
_____	_____	()
_____	_____	()
_____	_____	()

Other clubs or fraternal organizations to which you belong: _____

SIGNATURE OF APPLICANT: _____

Note: New member must attend a minimum of four (4) meetings during his first year of membership.

Applicant has been known to sponsor for _____ years.

NAME OF SPONSOR (please print): _____

Sponsor's Signature: _____

Sponsor's Phone No.: () _____

Before applicant can be presented to the Board of Directors for consideration, applicant must be interviewed by the Membership Committee. Applicant will be notified when he is to appear before the Membership Committee for interview.

Upon review and acceptance of your application an initiation fee of _____ will be due and payable. All other dues and other applicable fees will be due and payable two weeks prior to your initiation into the San Francisco Italian Athletic Club.

Office Use Only

Date of Interview: _____ Initiation _____

Dues _____

Date of Initiation: _____ Other _____

Other _____

Total _____