

APPLICATION FOR VENETIAN CLUB MEMBERSHIP

NAME _____ MAIDEN _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

AGE _____ DATE OF BIRTH _____ PHONE # _____

PLACE OF EMPLOYMENT _____

OCCUPATION _____

EMAIL ADDRESS _____

MARITAL STATUS SINGLE MARRIED

SPOUSE'S NAME _____

IS YOUR SPOUSE A MEMBER YES NO

I AM OF ITALIAN DECENT

LAST NAME OF ITALIAN ANCESTOR _____

RELATIONSHIP (Father, Mother, Wife) _____

I AM MARRIED TO AN ITALIAN

SPOUSE'S NAME _____

I HAVE NO ITALIAN HERITAGE AND AM APPLYING FOR SOCIAL MEMBERSHIP

I WAS A PREVIOUS MEMBER AND LET MY MEMBERSHIP LAPSE

SIGNATURE OF APPLICANT _____ DATE _____

\$50 APPLICATION FEE AND \$75 FOR ANNUAL DUES MUST ACCOMPANY APPLICATION (\$125)

SPONSOR NAME _____ PHONE# _____

SPONSOR SIGNATURE _____

SPONSOR NAME _____ PHONE# _____

SPONSOR SIGNATURE _____