

DANTE CLUB AUXILIARY



Application for Membership

Date: _____

Name: _____

Italian Family name, if applicable: _____

Address: _____
Street

City _____ State _____ Zip _____

Email Address: _____

Home phone: _____ Cell: _____

I consent to have my contact information included in the public membership roster: []YES []NO

Dante Club Referring Member: _____

Members must be of Italian descent or married to an Italian.

Please check appropriate box(s):

[] Italian Descent

[] Married to an Italian

[] Spouse of Dante Member

I am applying for admission to the DANTE CLUB AUXILIARY and agree to abide by all the rules and regulations of its By-Laws, and any amendments thereto.

Applicant's Signature: _____

Initiation Fee \$ 10.00

Annual Dues \$ 40.00

Total Amount \$ 50.00

Dues must be paid in January, a late fee of \$10 added if dues are not paid by March 31st.

Mail completed application with check payable to Dante Club Auxiliary to:

Debra Cattuzzo

5738 Verner Oak Court

Sacramento, CA 95841

MEMBERSHIP COMMITTEE / OFFICE USE ONLY

New member contacted _____ Board members notified _____ Calendar to new member _____ Notify Men's Club _____

Check to Treasurer _____ Nametag made _____ Placed on master roster _____ Caller _____