DANTE CLUB AUXILIARY



Date:		
Name:		
Italian Family name, if appli	cable:	
Address:		
City:	State	Zip
Email Address:		
Home phone:	Cell:	
I consent to have my informa	tion in the public membersl	nip roster: []YES []NO
List the Dante Club Referring	g Member, if any:	
Members mu	st be of Italian descent or m Please check appropriate	
[] Italian Descent	[] Married to an Italian	[] Spouse of Dante Member
I am applying for admission and regulations of its By-Lav		LIARY and agree to abide by all the rules ereto.
Applicant's Signature:		
	Initiation Fee \$ Annual Dues \$ Total Amount \$	40.00
***If joining after July-dues v due in January-late fee of \$10		he end of year. The annual dues of \$40 are
Mail completed application with	check payable to Dante Club Au	xiliary to: Debra Cattuzzo
		5738 Verner Oak Court
		Sacramento, CA 95841
MEMBERSHIP COMMITTEE / OF	FICE USE ONLY	
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New member contactedBoar	d members notifiedCalend	ar to new memberNotify Men's Club
Check to Treasurer Nan	netag made Placed on maste	r roster Caller