DANTE WOMEN'S CLUB

Application for Membership

Date: _____

Name:_____

Italian Family name, if applicable: _____

Address: _____

City: _____**State** _____ **Zip** _____

Email Address: _____

Home phone: _____ **Cell:**_____

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

List the Dante Club Referring Member, if any: _____

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 (please note if joining after July-dues will only be $5 each month until the end of year-ie: Sept to Dec would be $20.00 dues)*

The annual dues of $40 are due in January-add a late fee of $10 if not paid by March 15th.

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 _____