



ORDER SONS OF ITALY
Grand Lodge of California
5051 Mission St. - San Francisco, CA 94112
Tel. (415) 586-1316 Fax (415) 586-4786
e-mail: sonsofitalyca@aol.com

Member At-Large Membership Application

TELEPHONE NUMBER: () - (Onlineapp 8/01) LODGE NUMBER: _____

MEMBER LAST NAME: _____ MEMBER FIRST NAME: _____

ST. ADDR: _____ CITY: _____ STATE: ___ ZIP: _____

1. I have never belonged to any Lodge of the Order. (If this is not true, fill the following two lines.)

I have been a member of Lodge _____ from which I was terminated
on ___ / ___ / ___ for _____

2. My occupation is (or if retired was) _____

3. I am: Single ___ ; Married ___ and my spouse name is: _____

I have ___ children whose names are _____

4. I am ___ , am not ___ of Italian descent. My spouse is ___ , is not ___ of Italian descent.

5. Explain source of Italian descent :

6. I know of no reason why I should not qualify to become a member of this Order.

I do solemnly declare and promise to accept and respect the principles upon which the Order Sons of Italy in America is based; the laws of the Supreme Lodge, of the Grand Lodge, and of my Lodge. I promise to be bound by the deliberations of the majority; to obey the orders of the National President, the State President, and the President of my Lodge and support the charitable endeavors of the Order. I promise to obey, uphold and defend the laws and the Constitution of the United States of America.

SIGNATURES -

PAYMENTS TO BE MADE BY APPLICANT

Applicant _____

Admission Fee.....\$10.00

State Financial Secretary _____

Annual Dues..... 50.00

Date: ___ / ___ / ___

Total Payment Due \$ 60.00

To apply for membership: 1- print this form; 2- complete all requested data; 3- mail application and total payment due to the address listed at the top of the form.