

Order Sons of Italy Grand Lodge of California

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Return locally to:
Membership Chairperson
Order Sons of Italy in America
P. O. Box 994107
Redding, CA 96099-4107

Return completed form to local
Lodge Financial Secretary

Office Use Only:

Batch# _____

Member # _____

Date Reported: _____

Application

Date:

Shasta Lodge

Lodge

2453
Lodge Number

Type of Membership

Regular	R
Associate	A
Social	S
Social with insurance	SCB
Junior Social	JRS
Junior with Insurance	JR

(circle one)

Date Initiated _____

Daytime Phone _____

Evening Phone _____

E-Mail Address

married single widowed

Relationship _____

Spouse Name _____

Last Name _____ First _____ Middle Initial _____

Address _____

City _____ State _____ Zip _____

Male _____ Female _____

Birth Date _____ Age _____

Occupation _____ Insurance beneficiary if applicable _____

Are you or your spouse of Italian descent? yes no

Explain source of Italian descent _____

Children's Names _____

Have you ever belonged to another Sons of Italy Lodge? yes no

Termination Date _____

Reason for termination _____

Lodge Name _____

I certify that the applicant is fully eligible for membership & recommend approval

Sponsor Signature _____ Sponsor Member # _____

I know of no reason why I should not qualify to become a member of this Order.
This application, when accepted in writing by the Grand Lodge of California shall constitute a formal contract between the Grand Lodge of California and myself.

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 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 Constitution of the United States.

Signatures

Applicant _____

Grand Officer _____

Financial Secretary _____

Date _____

Payments To Be Made By Applicant

Lodge Admission Fees _____

Mortuary Fund Adm Fees _____

Dues _____

Miscellaneous Fees _____

Total _____