



**PRELIMIARY MEMBERSHIP APPLICATION
LODGE 1543 HANFORD, CALIFORNIA**



DATE (MM/DD/YYYY): ____/____/____

Last Name Middle First

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

DATE OF BIRTH: ____/____/____ AGE: ____ PLACE OF BIRTH: _____

ITALIAN DESCENT: Y or N OTHER: _____

SPOUSE: _____ ITALIAN DESCENT : Y or N

YOUR OCCUPATION: _____

YOUR EMPLOYER: _____

HOBBIES: _____

SPONSORED BY: _____
☐ REGULAR ☐ YOUTH
☐ ASSOCIATE ☐ SOCIAL

PHONE: HOME: _____ CELL: _____

EMAIL ADDRESS: _____

SIGNATURE OF APPLICANT