MEMBERSHIP APPLICATION

First Name	Initials	Surname	C. 17
Street Address	City	Province/St	ate Postal/Zip Code
Home Phone#		Work or Cell#	
E-mail Address:			
Birth date (Month/Day/Year)		Age:	Gender (M/F):
Family's town(s) of Origin in Ital	y:		
Profession(Optional)		Marital Status	(Optional)
Children's Names (if under 18)			
		Date of Birth:	
I hereby declare that I will abide Constitution.	e by the rules and regulatio	ons of the Dante Club as se	t out by its Bylaws and
Applicant's Signature	Date	Sponsor (cu	rrent member in Good Standing)
Please select which membership case you are not eligible or are		, , , ,	on the amount underlined. In the ed.
 General Membership: Initia 	tion Fee (\$50.00) + Yearly	Dues (\$50.00)	= <u>\$100.00</u>
O Student Membership (must	be a full-time student): Ye	early Dues (\$20.00)	= <u>\$ 20.00</u>
Senior Membership (over 6	0 years of age): Initiation F	ee (\$50.00) + 5 years of d	ues (\$250.00) = \$300.00
*Fees are subject to change			
FOR BOARD USE ONLY:			
Date of Review:			○ Approved
Notes:			○ Rejected
PRESIDENT:	SI	ECRETARY:	

1330 London Rd., Sarnia, ON N7S 1P7 Phone: 519-542-9311