



*Our youth is our best investment*

## APPLICATION FOR MEMBERSHIP

— QUESTIONS TO BE ANSWERED BY APPLICANT —

### FOR CLUB SECRETARY USE ONLY

DATE RECEIVED \_\_\_\_\_

DATE SWORN IN \_\_\_\_\_

MEMBER # \_\_\_\_\_

CLUB SECRETARY \_\_\_\_\_

DATE OF APPLICATION \_\_\_\_\_

NAME \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE)

HOME ADDRESS \_\_\_\_\_  
(CITY/TOWN) (STATE) (ZIP)

PHONE \_\_\_\_\_ CELL \_\_\_\_\_ E-MAIL \_\_\_\_\_

PLACE OF BIRTH \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

EMPLOYER - NAME \_\_\_\_\_ OCCUPATION \_\_\_\_\_

ADDRESS \_\_\_\_\_

Are you a citizen of the United States?

YES ☐

NO ☐

Are you a member of the Communist Party, or have you any connections or affiliation with any organizations or group advocating or believing in the overthrow of the United States Government by force?

YES ☐

NO ☐

Have you ever pleaded guilty to or have been convicted of a felony?

YES ☐

NO ☐

If you answer is in the Affirmative, gives dates and place of conviction:

1. \_\_\_\_\_  
(Date) (Place)

2. \_\_\_\_\_  
(Date) (Place)

Have you served in the Armed Services of the United States or any of its Allies?

YES ☐

NO ☐

State character of discharge received \_\_\_\_\_

Have you ever been rejected for membership?

YES ☐

NO ☐

Have you ever been a member of this organization?

YES ☐

NO ☐

When \_\_\_\_\_

Give references of at least two members of this organization, **other than sponsor**. (PLEASE PRINT)

Name

Home Address

1. \_\_\_\_\_

2. \_\_\_\_\_

Give your last three (3) places of residence for the past five (5) years.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

This application must be accompanied by payment of \$90.00 which is annual membership dues of \$80.00 covering remaining portion of calendar year, and \$10.00 application fee. In the event that application is rejected, dues of \$80.00 will be refunded. **In the event that the applicant does not call/attend two consecutive investigation committees or swearing in meetings the entire \$90 will be forfeited.** Annual dues payable November 1st DEADLINE JANUARY 31st.

SPONSORING MEMBER

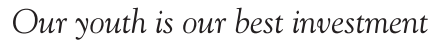
(PLEASE PRINT)

ADDRESS OF SPONSORING MEMBER \_\_\_\_\_

SPONSORING MEMBER

(SIGNATURE)

ZIP \_\_\_\_\_



Rev 9/2025