



*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 \_\_\_\_\_



*Our youth is our best investment*

*Dedicated to the perpetuation of athletics,  
good sportsmanship and active citizenship  
in memory of  
Paul and Irving Mitchell.*

29 ELM STREET  
MIDDLEBORO, MASSACHUSETTS  
508-947-9893

Fold on dotted line

<p><b>APPLICANT</b>  <b>DO NOT WRITE BELOW</b>  For Investigating Committee Only</p> <hr/> <p style="text-align: right;">Chairman</p>	<p><b>APPLICANT CAN ONLY BE ACCEPTED</b>  <b>AT A REGULAR MEETING</b></p> <hr/> <p>It is the duty of the investigating committee to carefully examine this application, verify the statements and report at the next regular meeting.</p> <p>Should an applicant fail to present himself at the time of invitation, without good cause, he will not be considered for membership.</p>	<p><b>MEMBERSHIP APPLICATION</b></p> <hr/> <p>JUNE</p> <p>OCTOBER</p> <p>FEBRUARY</p> <hr/> <p>SUBMITTED FOR INVESTIGATION</p> <p>DATE _____</p> <p>ACCEPTED <input type="checkbox"/></p> <p>REJECTED <input type="checkbox"/></p> <p>REASON FOR REJECTION</p> <hr/> <hr/> <hr/>
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