

MEMBERSHIP ENROLLMENT FORM

ORDER SONS OF ITALY IN AMERICA - GRAND LODGE OF PENNSYLVANIA
(A Fraternal Benefit Society)

The Curtis Center, Suite L-45
601 Walnut Street
Philadelphia, PA 19106
Phone: (215) 592-1713 Fax: (215) 592-9152

Lodge Name **UFFICIALE BERSAGLIERI** Lodge No. **138**

PROPOSED MEMBER:

Full name (print) _____ Sex _____ Birth Date _____ Age _____

Address _____ City _____ State _____ Zip _____

Telephone (_____) _____ E-mail _____ Mobile (_____) _____

Fax (_____) _____ Occupation _____ Nationality _____

Sponsor (print) _____ Death Benefit Amount \$ _____

Name of Beneficiary _____ Relationship to Member _____

Italian Affiliation (If your current last name is not of Italian origin please specify your Italian Affiliation for Membership

LAGREE THAT NO DEATH BENEFIT SHALL TAKE EFFECT UNTIL INTIAL DUES HAVE BEEN PAID.

Signed at _____

this _____ day of _____

Membership Signature _____

Signature of Lodge Secretary

OFFICE USE ONLY

No. _____

DOE _____

Member Cat. _____