



## Italian American Club of South Brevard Inc.

1471 Cypress Avenue, Melbourne, FL 32935

Phone (321) 242-8044 | Email: [iacsb@cfl.rr.com](mailto:iacsb@cfl.rr.com) | Web: [www.iac321official.com](http://www.iac321official.com)

### MEMBERSHIP APPLICATION

PLEASE PRINT CLEARLY

Applicant #1 Name: \_\_\_\_\_ Phone #1: \_\_\_\_\_

Applicant #2 Name: \_\_\_\_\_ Phone #2: \_\_\_\_\_

Email #1: \_\_\_\_\_ Email #2: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Occupation: \_\_\_\_\_

Hobbies: \_\_\_\_\_

Volunteer Interests: Event Sales \_\_\_\_ Cooking \_\_\_\_ Serving \_\_\_\_ Setup \_\_\_\_ Cleanup \_\_\_\_

Experience (Check if applicable): Electrical \_\_\_\_ Plumbing \_\_\_\_ Carpentry \_\_\_\_

Maintenance: \_\_\_\_\_

I hereby apply for membership to the Italian American Club of South Brevard Inc.

I agree to uphold the Constitution and By-Laws of the club.

Signature applicant #1: \_\_\_\_\_ Date: \_\_\_\_\_

Signature applicant #2: \_\_\_\_\_ Date: \_\_\_\_\_

**ALL MEMBERSHIPS RENEW OCT. 1ST OF EACH YEAR.**

**Annual membership dues: \$60 for a single applicant and \$84 for a couple.**

**Please note there are no prorated dues.**

Club Use Only

Amount Paid: \$\_\_\_\_\_ Credit Card: \_\_\_\_ Check #: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Received by: \_\_\_\_\_

Issued Membership Card: \_\_\_\_\_