



Associazione Casacalendese

Application for Admission

Name of Member Sponsoring:	
The under-noted requests to be admitted to the <i>Associazione Casacalendese</i> as a member, conforming to and respecting all its bylaws and resolutions legally adopted.	
Name of aspiring member:	
Address:	
	Postal Code:
Telephone number:	Res.: Work:
E-mail address:	
Date of birth:	
Place of birth:	
Occupation:	

To be eligible, one must conform to one of the following criteria - Indicate with an (x):	
<input type="checkbox"/>	Born in Casacalenda or resident of Casacalenda for more than three years. Residence from: _____ To: _____
<input type="checkbox"/>	Son/daughter of a Casacalendese: <input type="checkbox"/> Parent <input type="checkbox"/> Grandparent Name: _____
<input type="checkbox"/>	Married to a Casacalendese. Name of spouse: _____
<input type="checkbox"/>	Son/daughter or grandchild of a Member of the Associazione Casacalendese Name of member: _____

Signature of aspiring member:	
Signature of witness:	
Date:	

N.B. The aspiring member must be present at a General Meeting and must be prepared to take the oath to be officially admitted. The Secretary will notify the aspiring member of the set date of the meeting.

Admission	Membership No.:	
Adopted by the Executive Council on: day : _____ month: _____ year: _____	Admission tax	\$
(Name): _____	Bylaws	\$
has been admitted as member of the <i>Associazione Casacalendese</i> and has paid the annual fee of \$ _____	Fee	\$
	Total	\$
Signature of Secretary: _____ Date: _____	Signature of Treasurer:	
Signature of President: _____ Date: _____	Date	