Order Sons of Italy
Grand Lodge of California
Watsonville Lodge #2016
P. O. Box 1438
Watsonville, CA 95076
Ph: 831-722-7958 Fax: 831-722-7924
Email: sonsofitalywatsonville@yahoo.com
Website: www.sonsofitalywatsonville.org

Return completed form to local
Lodge Financial Secretary

Office Use Only:	
Batch#	
Member #	
Date Reported:	

Application   Date: _____

_____
Lodge   Lodge Number

_____
Last Name   First   Middle Initial

_____
Address

_____
City   State   Zip

Male ___ Female ___   _____
                         Birth Date   Age

_____
Occupation

_____
Insurance beneficiary if applicable

Are you or your spouse of Italian descent?   yes   no

Explain source of Italian descent _____

Children's Names _____

Have you ever belonged to another Sons of Italy Lodge?   yes   no

_____
Reason for termination

I certify that the applicant is fully eligible for membership & recommend approval.

Sponsor Signature _____

Type of Membership

Regular	R
Associate	A
Social	S
Social with insurance	SCB
Junior Social	JRS
Junior with Insurance	JR

(circle one)

Date Initiated _____

Daytime Phone _____

Evening Phone _____

E-Mail Address _____

Marital Status
married   single   widowed

(circle one)

_____
Spouse Name

Termination Date _____

Lodge Name _____

Sponsor Member # _____

I know of no reason why I should not qualify to become a member of this Order.
This application, when accepted in writing by the Grand Lodge of California,
shall constitute a formal contract between the Grand Lodge of California and myself.

I do solemnly declare and promise to accept and respect the principles upon which the Order Sons of Italy in America
is based, the laws of the Supreme Lodge, the Grand Lodge, and my Lodge. I promise to be bound by the deliberations of
the majority, to obey the orders of the National President, the State President, and the President of my Lodge and support the
charitable endeavors of the Order. I promise to obey, uphold and defend the laws and Constitution of the United States.

Signatures

Applicant	_____
Grand Officer	_____
Financial Secretary	_____
Date	_____

Payments To Be Made By Applicant

Lodge Admission Fees	_____
Mortuary Fund Adm Fees	_____
Dues	_____
Miscellaneous Fees	_____
Total	_____