



Italian - American Club of Livonia

MEMBERSHIP APPLICATION

(For people of Italian descent only)

DATE: _____

I, the undersigned, hereby apply for membership in the Italian-American Club of Livonia.

Last Name _____ Date of Birth _____ First Name _____

Spouse's First Name _____ Date of Birth _____ Spouse's/App's. Maiden Name _____

Home Address _____ Anniversary _____ Home Phone _____

City: _____ State: _____ Zip: _____ Italian Heritage - City and Region: _____ / _____

Circle one (SELF) (PARENTS) (GRANDPARENTS)

Business Address _____ Phone: _____

City _____ State _____ Zip _____ Occupation: _____

E-mail Address: _____

List children still living at home. (Children over 21 must have their own membership)

<u>NAME</u>	<u>RELATIONSHIP</u>	<u>BIRTH DATE</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

PLEASE NOTE: LIFETIME MEMBERSHIP AND ANNUAL MEMBERSHIP IS NON-REFUNDABLE AND NOT TRANSFERABLE.

Sponsor's Signature

Applicant's Signature

MEMBERSHIP FEES

Annual Renewal

- \$250.00 per year per **FAMILY** (children under 21 yrs.)
- \$35.00 per year **YOUNG ADULT SINGLE for ages 18-25**
- \$150.00 per year for **SINGLES 26 and older**
- \$150.00 per year for **SENIORS (Couples) 66 and older**

Lifetime Membership

- Option #1** - \$2,000.00 Onetime payment - No dues Obligation
- Option #2** - \$500.00 Initial Payment with three quarterly payments of \$500.00 each (Balance must be paid in full within **two** years)

Renewal dues **must be paid by March 1**

If payment is made **after March 1** a reinstatement fee of **\$50.00 will be charged**

Dues are prorated after July

PLEASE RETURN FORM AND PAYMENT PAYABLE TO:

ITALIAN-AMERICAN CLUB OF LIVONIA

Club House/Attn: Gianna Prokop

39200 Five Mile Road

Livonia, MI 48154

If you have any questions, please call Gianna Prokop at: (734) 953-1137 press 2

For office use only:

Date Accepted: _____ Amount of Check: _____ Check#: _____ Cash: _____ Computer: _____ Card: _____

REVISED/APPROVED: 8/16/13