



Application for Membership in American Turners Fort Wayne Society

Date _____ Married _____ Couple _____
Single _____ Junior _____ Reinstatement _____ (No proration)

Male Applicant _____ DOB _____

Male Email Address _____

Male Occupation _____

Male Place of Employment _____

Female Applicant _____ DOB _____

Female Email Address _____

Female Occupation _____

Female Place of Employment _____

Address _____ Phone _____

City _____ State _____ Zip _____

Name and Birth date of Children under the age of 18:

Name _____ DOB _____ Name _____ DOB _____

Name _____ DOB _____ Name _____ DOB _____

Volunteer Interest Include:

Germanfest _____ Johnny Appleseed _____ Coaching _____ Cooking _____

Tournaments _____ Handiwork _____ Other _____

Male Applicant Signature _____

Female Applicant Signature _____

Proposed & Recommended By _____

Sponsored & Recommended By _____

Membership Committee Member _____

Amount Received \$ _____ . _____

Applicant(s) Must Attend a Meeting with the Membership

Committee Before this application can be considered