

# SEASIDE ITALIAN AMERICAN CLUB, INC.

## Application for Membership

308 Hamilton Avenue, Seaside Heights NJ 08751, 732-793-1737

Date \_\_\_\_\_

Having met the requirements for membership, I hereby make application for membership in the **Seaside Italian American Club, Inc.** Annual Membership dues are \$25.00 for one year. .

Members are encouraged to participate in work activities for the Club. We look forward to your dedication, participation and devotion to as many of the following activities our club entails. Thank you for your interest in the Seaside Italian American Club, Inc.

**We feel the most important activity is working on the Boardwalk when we promote a car raffle and would appreciate your making this a priority for the Club.**

Other activities include but are not limited to:

- *House Committee* -caring for the club buildings.
- *Bar duties.*
- *Kitchen Committee* -preparing occasional meals.
- *Entertainment Committee* -setting up entertainment for various functions.
- *Scholarship Committee* -members will be selected for this particular committee.

Please feel free to volunteer for any committee that interests you. Committee participation is an integral part of being a Club member and we take great pride in all we do for our Club and community. If for any reason you feel you cannot participate in a committee activity please let us know, we stress the importance of participation and your reason for non-participation will be discussed and evaluated.

You will be a Probationary Member for (2) two year.

### PLEASE PRINT

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Cell \_\_\_\_\_

Winter Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Anniversary \_\_\_\_\_ Birthday \_\_\_\_\_ Occupation \_\_\_\_\_

E-Mail \_\_\_\_\_ Telephone \_\_\_\_\_

Sponsor \_\_\_\_\_ signature \_\_\_\_\_

Received payment for Year: 20 \_\_\_\_\_ Date \_\_\_\_\_

Date Sworn-in: 20 \_\_\_\_\_

# SEASIDE ITALIAN AMERICAN CLUB

308 Hamilton Ave. Seaside Heights NJ  
(across from the Lumber yard)  
732-793-1737

## REQUIRMENTS for MEMBERSHIP

### MEETING TIMES

Social Night every Thursday night 4:30  
Board of Directors: 1st Monday of the month, 6:00 PM  
General Meeting: 3rd Monday of the month, 6:00 PM

1. Membership shall be open to persons eighteen years or over.
2. A member must be of at least one-quarter Italian extraction, regardless of derivation from a male or female, or married to an Italian.
3. Those of non-Italian heritage can become an Associated member. Associated members shall receive all benefits, but cannot vote or hold office.
4. Applications must be submitted to the Board of Directors at one of their meetings. After due consideration of the new applicant the Board of Directors must submit the application of the proposed member to the general membership together with their recommendations . The decision of the majority of the general membership shall be considered final. Dues shall be paid at the time of swearing in.
5. All new members shall be sworn into the organization at a general meeting.

**It is suggested the applicant attend three (3) club functions *before* submitting an application. This is for the applicant to experience the club and for the members to get to know the applicant.**