



**ORDER SONS OF ITALY**  
**Grand Lodge of California**  
 5051 Mission St. - San Francisco, CA 94112  
 Tel. (415) 586-1316 Fax (415) 586-4786  
 e-mail: sonsitalyca@aol.com

**Member At-Large**  
**Membership Application**

TELEPHONE NUMBER: ( ) - (Onlineapp 8/01) LODGE NUMBER: \_\_\_\_\_

MEMBER LAST NAME: \_\_\_\_\_ MEMBER FIRST NAME: \_\_\_\_\_

ST. ADDR: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

1. I have never belonged to any Lodge of the Order. ( If this is not true, fill the following two lines. )

I have been a member of Lodge \_\_\_\_\_ from which I was terminated  
 on \_\_\_\_ / \_\_\_\_ / \_\_\_\_ for \_\_\_\_\_

2. My occupation is ( or if retired was ) \_\_\_\_\_

3. I am: Single \_\_\_ ; Married \_\_\_ and my spouse name is: \_\_\_\_\_

I have \_\_\_ children whose names are \_\_\_\_\_

4. I am \_\_\_ , am not \_\_\_ of Italian descent. My spouse is \_\_\_ , is not \_\_\_ of Italian descent.

5. Explain source of Italian descent :

6. I know of no reason why I should not qualify to become a member of this Order.

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, of the Grand Lodge, and of 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 the Constitution of the United States of America.

**SIGNATURES -**

**PAYMENTS TO BE MADE BY APPLICANT**

Applicant \_\_\_\_\_

Admission Fee.....\$ 10.00

State Financial Secretary \_\_\_\_\_

Annual Dues..... 50.00

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Total Payment Due \$ 60.00

To apply for membership: 1- print this form; 2- complete all requested data; 3- mail application and total payment due to the address listed at the top of the form.