# Italian Workmen's Club
# Membership Application

914 Regent Street
Madison, WI 53715
608 258-1880

Application Date: _____

First Name:_____ Last Name: _____

Street Address: _____

City: _____ State: _____ Zip:_____

Occupation (if retired, former occupation): _____

Company: _____

Date of Birth: _____

Home Phone Number: _____ Work Phone: _____

Cell Phone Number: _____

E-mail Address:_____

**Membership Rules:**

- A member of the club who is in good standing must sponsor you.
- You (or your spouse) must be at least 1/8 Italian to be admitted to the club (parent or grandparents). This requirement is met by ☐ Me, ☐ My spouse (check one)

Italian Relation Name(s): _____

Sponsoring Member:_____

Membership Dues: **$48**/yr

You must appear before and be approved by the IWC council (meets 2nd Tuesday of the month), then attend the general membership meeting (meets 3rd Tuesday of the month) and be approved by the membership. All meetings are held at the clubhouse, 914 Regent St.

I am interested in participating in the following club functions or committees:

☐ Festa Italia
☐ Golf Outing
☐ IWC Picnic
☐ Website Committee
☐ Christmas Parties
☐ Kitchen Help (Meetings)
☐ Scholarship Committee
☐ Other _____
☐ Building Committee
☐ Newsletter Committee
☐ Membership Committee

Copies: 1 copy to Membership Secretary, 1 copy for Mailing List curator, original is filed in the office. 04/05

This form is designed to be filled out on using your computer
For more information about the IWC, please visit our website at www.iwcmadison.com