



APPLICATION FOR MEMBERSHIP / RENEWAL

I hereby apply for membership/renewal in the Irish American Association of Northwest Jersey. By acceptance, I promise to obey its laws, promote its interests, further its principles, make every attempt to attend its meetings, take part in its deliberations and support the Association in all its functions.

FULL NAME: _____

SPOUSE'S NAME: _____

ADDRESS: _____

CITY / STATE/ZIP: _____

AREA CODE/ PHONE NO. _____

WORK PHONE NO. _____

OCCUPATIONS: SELF / SPOUSE _____

EMAIL ADDRESS: _____
(PLEASE PRINT E-MAIL ADDRESS LEGIBLY)

Please check one of the following and submit the dues with your application
Make checks payable to the IAANJ:
(Senior Citizen is a person 65 years of age or older.)

MEMBERSHIP DUES FOR 2010			
<input type="checkbox"/>	\$25.00 per Married Couple	<input type="checkbox"/>	\$20.00 per Individual
<input type="checkbox"/>	\$20.00 per Married Seniors	<input type="checkbox"/>	\$10.00 per Individual Senior

Acceptance of application shall entitle the member to all rights and privileges of our Associations

SIGNATURE _____ DATE: _____