



Order Sons and Daughters of Italy in America®

Lodge 2817 New Membership Application

<https://www.trianglesonsofitaly.org>

Member Type: Adult ___ Social ___ (Non-Italian Heritage, Can't Serve on Council)

Membership Fees

Your ongoing Annual fees will be \$50 primary family member, \$40 for an additional family member. Membership fees are prorated quarterly for new members based on when you apply for membership. **Please select one below** based on the time period that you are joining the Lodge and whether you are a primary family member or have an additional family member single. A **one-time initiation fee of \$15** will be added to each new member.

Date of Joining	Primary Household Member <i>Initiation Fee Included</i>	Primary + Additional Household Member <i>Initiation Fee Included</i>
Sep. 1 – Nov. 30	___ \$65	___ \$120
Dec. 1 – Feb. 28	___ \$53	___ \$99
Mar. 1 – May 31	___ \$41	___ \$78
Jun. 1 – Aug. 31	___ \$29	___ \$57

Primary Household Member

First Name: _____ MI: ___ Last Name: _____

Street Address: _____

City: _____ State: ___ Zip Code: _____ Birth Date: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Tell us about your Italian Heritage: _____

How did you hear about us? _____

Occupation: _____

Interests/Hobbies: _____

Additional Household Member (Optional)

First Name: _____ MI: ___ Last Name: _____

Birth Date: _____ Cell Phone: _____

Email: _____

Tell us about your Italian Heritage: _____

Occupation: _____

Interests/Hobbies: _____

It is expected of each member to contribute their time and effort in support of activities, events, and our charitable organizations. In some cases, monetary donations may be acceptable contributions. Although these contributions will not be tracked, the devotion of each member will support the continuation of our Lodge.

In order to satisfy my time & effort to support the Lodge, I want to volunteer for:

Primary Household Member

Committee Member _____ Organize an event _____ Council Member _____

Cook for an event _____ Set up/clean up an event _____

Host an event at my home for 20-25 people _____ Become a Lodge Sponsor: _____

Bocce Tournament: _____ Scholarship Breakfast Fundraiser: _____

Additional Household Member (Optional)

Committee Member _____ Organize an event _____ Council Member _____

Cook for an event _____ Set up/clean up an event _____

Host an event at my home for 20-25 people _____ Become a Lodge Sponsor: _____

Bocce Tournament: _____ Scholarship Breakfast Fundraiser: _____

Payment

Please send the completed application and a check and mail it to:

**Bernard Castellano
405 Wapner Court
Cary, NC 27519.**

If you have questions regarding this application, please contact our membership chair Bernard Castellano at bcas1947@aol.com.

For Office Use Only

Primary Member Membership Number: _____

Additional Member Membership Number: _____