



MEMBERSHIP APPLICATION

NEW YORK GRAND LODGE, ORDER SONS OF ITALY IN AMERICA

2101 Bellmore Avenue, Bellmore, New York 11710
Tel. (516) 785-4623 or 1-800-322-6742 website: www.nyosia.org

Local Lodge Name & Address

Dr. Vincenzo Sellaro Lodge #2319
P.O. Box 301
Smithtown, NY 11787

Type or print legibly and answer all questions below:

Type of Application: Lodge Member _____ Social Member _____ Transfer _____ Reinstatement _____

Lodge Name & Number Dr. Vincenzo Sellaro Lodge #2319 District 1

Applicant's Name _____ Date of Birth _____ Home Phone () _____

Address _____ City _____ State _____ Zip _____

Occupation _____ Work Phone () _____ Email address: _____

Marital Status: _____ Name of Spouse _____ If you do not have an Italian surname, indicate the relationship of your Italian American lineage. _____

Are you a U.S. Citizen Yes _____ No _____ Place of Birth: _____

Have you ever held membership in the Order Sons of Italy in America? Yes _____ No _____

If yes, name of lodge and number: _____ Date Membership Discontinued _____

Reason: _____

Do you belong to any other Italian American organizations? Yes _____ No _____

If yes, name the organization(s) _____

Member statement: I do solemnly swear that the answers to all questions are true and that if any misstatements are discovered anywhere in this application I shall abide by the disciplinary measures taken by the Order, including the rendering of this application null and void, and the deprivation to me, to my heirs, and/or to my assignees of all benefits and privileges of the lodge.

Signed: _____ Date: _____

Sponsor statement: I hereby declare, upon my word of honor, that I know the applicant, and to the best of my knowledge, the applicant's statement are true and consider him/her worthy of membership in the Order Sons of Italy in America.

Signed: _____ Print Name of Sponsor _____ Date _____

LOCAL LODGE MUST FILL OUT THE FOLLOWING INFORMATION FOR THIS APPLICATION TO BE VALID. PLEASE NOTE—APPLICATION WITH FEE ATTACHED MUST BE RECEIVED AT THE GRAND LODGE OFFICE WITHIN 10 DAYS AFTER MEMBER IS INITIATED.

1. Date Application Received _____
2. Date Application Published/Read _____
3. Date Approved by Assembly _____
4. Date Member Initiated _____ **(this date must be filled in to complete form)**

Date Application Forwarded to Grand Lodge, Attention State Financial Secretary with proper application fee _____

White copy-Send to Grand Lodge

Yellow copy-Keep for local lodge