



# Polish Falcons of America Nest 519

144 Prout Hill Road, Middletown, CT 06457

## MEMBERSHIP APPLICATION

(860) 346-8037

### OFFICE USE ONLY

ID# \_\_\_\_\_

# of cards \_\_\_\_\_

Induc. Date \_\_\_\_\_

To be filled out by applicant

### APPLICANT INFORMATION

Date \_\_\_\_\_

Name – First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Best Phone \_\_\_\_\_ Email \_\_\_\_\_

Occupation \_\_\_\_\_ Are you of Polish Decent ☐ Yes ☐ No D.O.B. \_\_\_\_\_

Interests or Hobbies \_\_\_\_\_

### SPOUSE'S INFORMATION

(In order for your spouse to receive a key card, he/she must receive What Every Falcon Needs to Know & signoff on it)

Name – First \_\_\_\_\_ Middle \_\_\_\_\_ Maiden \_\_\_\_\_

Occupation \_\_\_\_\_ Are you of Polish Decent ☐ Yes ☐ No D.O.B. \_\_\_\_\_

### CHILDREN (under 21)

First Name \_\_\_\_\_ Age \_\_\_\_\_ First Name \_\_\_\_\_ Age \_\_\_\_\_

### EMERGENCY CONTACT

Name \_\_\_\_\_ Phone \_\_\_\_\_

### GENERAL MEMBERSHIP QUALIFICATIONS AND QUESTIONS

*Applicant must be of good character, at least 21 years old, believe in God and not be a member of any secret society or political party which advocates the overthrow or change of systems in the Government of the United States of America.*

1. Are you a citizen of the United States of America? ☐ Yes ☐ No

2. Are you a member of any other organization? ☐ Yes ☐ No

List \_\_\_\_\_

3. Have you ever had your membership in any organization suspended or terminated? ☐ No ☐ Suspended ☐ Terminated  
Reason \_\_\_\_\_

4. Have you ever applied for membership with the Polish Falcon's in the past? ☐ Yes ☐ No

5. What is your interest in joining this organization? \_\_\_\_\_

6. In what areas are you willing to donate four (4) hours of your time per year to help the Polish Falcon's club?

Cooking, Entertainment, Building, Grounds, Cleanup after events,  
etc. \_\_\_\_\_

**All members are entitled to purchase Falcon Life Insurance or Annuity**—entitling you to a vote at Falcon Business Meetings, to run for office at Polish Falcon's Nest 519 or to be a National delegate and participate in national events (plus)

7. Are you interested in becoming an insured member? ☐ Yes ☐ No ☐ Need / Want more information

*I agree to uphold the standards of the Polish Falcons of America Nest 519 as a family organization, abide by its by-laws and regulations; have mutual self-respect of my fellow members; and to respect traditional values of proper conduct and community cooperation.*

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Spouse Signature \_\_\_\_\_ Date \_\_\_\_\_

**THIS APPLICATION MUST BE ACCOMPANIED BY  
A \$25.00 APPLICATION FEE.**

Received by \_\_\_\_\_

### DUES SCHEDULE

(To be paid at time of induction)

**New Member inducted / Annually**

Jan 1<sup>st</sup> to Labor Day \$75.00

Labor Day to Dec 31<sup>st</sup> \$30.00

**Late fee:** \$10.00

(To be paid annually by Feb 15<sup>TH</sup>)

# MEMBERSHIP APPLICATION SPONSOR

## IMPORTANT INFORMATION – PLEASE READ CAREFULLY

You as the sponsor are responsible to notify the applicant of the interview and induction dates. These dates will be posted on the bulletin board in the clubroom by the end of the month prior to the interview date, i.e.: posted by Jan 31<sup>st</sup> for interview date in February.

Failure to attend the scheduled interview or induction will jeopardize the acceptance of the applicant! If your scheduled interview or induction date is impossible to attend please contact a member of the membership committee to make other arrangements.

**It is ultimately the responsibility of the sponsor to inform the applicant of the upcoming interview and induction dates.**

**Providing false data on a membership application or knowingly sponsoring an applicant of questionable character is cause for disciplinary action.**

*To be filled out by sponsor*

### SPONSOR INFORMATION

Name – First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_ Card No. \_\_\_\_\_

1. How long have you known the applicant? \_\_\_\_\_ Years (1 year minimum)

2. Is your acquaintance: ☐ Business ☐ Social ☐ Relative

3. Appraise the applicant's reputation for honesty and fair dealing: \_\_\_\_\_

\_\_\_\_\_

4. Why do you feel the applicant would make a good member? \_\_\_\_\_

\_\_\_\_\_

**I, as the sponsor, understand it is my obligation to attend the interview and the induction of this applicant.**

Sponsor signature \_\_\_\_\_ Date \_\_\_\_\_

### FOR OFFICE USE ONLY

Application for membership: ☐ Accepted ☐ Denied ☐ On Hold ☐ Withdrawn

If denied, reason \_\_\_\_\_

\_\_\_\_\_

Date of acceptance: \_\_\_\_\_ Induction date: \_\_\_\_\_

Interviewed by: \_\_\_\_\_

(Print)

(Signature)