

## UNICO NATIONAL

THE LARGEST ITALIAN AMERICAN SERVICE ORGANIZATION IN THE UNITED STATES

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"Service Above Self"

## **MEMBERSHIP APPLICATION**

(please print or type clearly)

Date Submitted:  Date Approved:  Chapter Secretary Signature:  Initial Fee Attached  \$			Member Age 25+ \$70 per year Youth Rate (Age 24 and under) FREE
		- Division	
Chapter Name:		District (State & Number):	
Applicant's Name:			
Home Address:			
City:	State:	Zip Co	ode:
Home Phone:	Ce	ll Phone:	
Email Address:			
Date of Birth:	Place	of Birth:	
Are you a U.S. Citizen? □YES □	NO If not born i	n the U.S., date naturalized?	
Proof of Italian Heritage or Ancestry	y (ie: Maiden Name, Grandparents	Name):	
Occupation:	Employer:	•	ess Phone:
List Involvement in Commi	ınity/Organizations or Of	fices Held (please include which of	fices held and vears)
List involvement in Commo	inity/Organizations of Or	nees fred (please metade which of	nees neid and years)
Do you understand that UNICO		Americans of Italian Heritage dedicated	ed to "Service Above Self"?
I hereby apply for membership and agree to abide by the UNICO National Constitution and By-Laws of UNICO National and this Chapter:			
Applicant Signature		Date	