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## APPLICATION FOR MEMBERSHIP IN OR TRANSFER TO SONS IN RETIREMENT, BRANCH 170

A Non-Profit Public Benefit Corporation For Retired Men  
Devoted to the Promotion of Independence and Dignity of Retirement

Please print the following information so we can help you become a part of SIR:

STATE MA First Name L. Middle Initial or Name CHANDLER Last Name  
17886 CAKESHORE N Home Address AUBURN City 95607 ZIP  
Extension  
Mailing Address (or "Same")  
Area Code 915 Telephone Number 963-6958  
Birth Date 9 mm 17 dd 54 yyyy  
Email Address (in CAPITAL letters) FIREFIGHTER17011@YAHOO.COM  
Wedding Anniversary 10 mm 21 dd 2017 yyyy

I was introduced as a guest at the luncheon meeting during the month of \_\_\_\_\_

I am retired from full time employment, and I am aware that regular attendance is essential for continued membership. I understand that I must attend at least one-half of the regular luncheon meetings (Ladies Day or Picnics and Holiday Luncheons are excluded) within the previous twelve consecutive month period, and I must not miss three consecutive regular luncheon meetings without having been excused by contacting the designated Branch Attendance person prior to the meeting date. If you will not be attending a luncheon, notice must be received by noon the \_\_\_\_\_ before the luncheon.

Stephen R. Michalak Sponsor's Printed Name 9/30/19 Date  
Stephen R. Michalak Sponsor's Signature 172 Badge No.

☒ I am a new member ☐ I am transferring from Branch # \_\_\_\_\_

How did you hear about Sons In Retirement?

STEPHEN MICHALAK

Supplying information about your former business or military connection will help us introduce you to new friends and make you aware of our many activities.

FIREFIGHTER Former Occupation/s with CITY OF RICHMOND Company or Organization 12 mm 15 dd 2017 Date Retired

I prefer to receive my monthly copy of our Branch newsletter: Please check your selection

☒ Electronically ☐ By USPS first class mail (May entail an additional charge)

A Branch official will contact you soon regarding the next step in the process.

Executive Committee acceptance date \_\_\_\_\_ Badge No. assigned \_\_\_\_\_

Membership Chairman \_\_\_\_\_

Please continue to Activities and Interests on page 2