



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

APPLICATION FOR MEMBERSHIP IN (OR TRANSFER TO)

Branch No. 170 Sons In Retirement, Inc.

APPLICANT, PLEASE PRINT THE FOLLOWING INFORMATION FOR THE RECORD:

Name BRIAN S. FOSTER Nickname (Call me) Diane
Address (Street, no., apt.) 23500 SHADOW DRIVE
12876 Lakeshore North Phone 530 268-9598
City Auburn Ca Zip Code (nine digit) 95602-8139

I was introduced as a guest at the luncheon meeting on 6-5-02
Date

3-11-46 9-17-83 _____
Birthday Wedding Anniversary Email Address

I am retired from full time gainful occupation. I understand that attendance is important and that I may be dropped from the rolls if I miss three consecutive meetings or attend less than so n meetings in twelve months, without notifying the Attendance Chairman, giving a valid reason.

Applicant's signature Brian Foster Date 6-5-02 Sponsor's signature Steve Banks Badge No. 170

If this is an application to transfer from another Branch, please give Branch No. from which you are transferring:

Number _____

Former Business Connection:

Hobbies: Golf, Tennis, gold panning, photography

FOR MEMBERSHIP COMMITTEE CHAIRMAN:

Badge No. Assigned: 156 Date _____