



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 RICHARD H. KNOWLEDEN Nickname (Call me) KAY Wife's first name  
Address (Street, no., apt.) 12023 LAKE SHORE NO. Phone 530-268-1155  
City ANBURN CA. Zip Code (nine digit) 95602 8236

I was introduced as a guest at the luncheon meeting on \_\_\_\_\_ Date

Birthday 9-1-38 Wedding Anniversary 11-10 E-mail 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 [Signature] Date 4/14/00 Sponsor's signature [Signature] Badge No. # 32

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

Number \_\_\_\_\_

Former Business Connection: \_\_\_\_\_

Hobbies: \_\_\_\_\_

FOR MEMBERSHIP COMMITTEE CHAIRMAN:

Badge No. Assigned: 109 Date 6-11-00