



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. _____ Sons In Retirement, Inc.

Applicant please print the following information for the record:

Frank E. Nole FRANK Rosalia
Name Nickname (Call me) Wife's first name

24394 ORO VALLEY RD 269 0424
Address (Street, no., apt.) Phone

Dubun CA 95602
City Zip Code

I was introduced as a guest at the luncheon meeting on Jan _____
Date

11-1-37 2-22-58
Birthday Wedding Anniversary

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 seven meetings in twelve months, without notifying the Attendance Chairman, giving a valid reason.

Frank E. Nole 2/2/95 Gene Topper 165
Applicant's signature Date Sponsor's signature Badge No.

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

Former Business Connection: _____

Hobbies: Mrs. Sears & owner of Clothing Store
Golf - DANCING

Badge No. Assigned 177