



# APPLICATION FOR MEMBERSHIP OR TRANSFER SONS IN RETIREMENT

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

MAN/07

Branch Name \_\_\_\_\_ Branch \_\_\_\_\_  
No. \_\_\_\_\_

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

FRANK W Rooney Alice  
 Your first name Initial Last Name Nickname (Call me) Wife's or Partner's first name

\_\_\_\_\_ Auburn 95602  
 Home Address (Street, No., Apt) City Zip Code

11796 Lakeshore North \_\_\_\_\_  
 Mailing Address (if different than your Home Address) City Zip Code

(530) 268-6767 MULLROONEY@USA 10-25-44 12-17  
 Tel. Area Tel. Number E-Mail MediA-TV Birth Date Wedding Anniversary

I attended a luncheon meeting on: 1-3-07 and I have retired from full time employment. I am aware that regular attendance is essential for continued membership.

Frank W Rooney 1-3-07 LYNDA LAIRD  
 Applicant's Signature Date Sponsor's Signature Badge Number

I am a new member.

I am transferring from: \_\_\_\_\_  
Branch Number

The following information will help us introduce you to new friends and make you aware of our many activities.

Former Business Connection: 0-0-00  
Occupation Company or Organization

Date you retired: 10-6-06

What are your Hobbies and Interests? Golf

For Membership Committee Chairman:

Jose ✓  
Timothy ✓  
Helen ✓  
Callie ✓

Date: \_\_\_\_\_