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

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:

ALAN (AKA) SWANBERG m SWANBERG Sweeney Stash  
First Name Middle Initial or Name Last Name Suffix Nickname Wife's (or SO's) first name  
14250 Torrey Pines Dr. Auburn 95602  
Home address City ZIP Extension  
10556 Combis Rd. #1477 Auburn 95602  
Mailing Address (or "Same") City ZIP Extension  
650 281 6922 ASWANBERG @ AOL.COM  
Area Code Telephone Number Email Address (in CAPITAL letters)  
Birth Date 7 17 1942 Wedding Anniversary 12 1 2007  
mm dd yyyy mm dd 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.

Duane Heston 7-27-17 Alan Sweeney  
Sponsor's Printed Name Date Applicant's Signature  
Duane Heston Sponsor's Signature Badge No.

☒ I am a new member ☐ I am transferring from Branch # \_\_\_\_\_  
<Check whichever applies>

How did you hear about Sons In Retirement? LOP

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.

General Contractor Swanberg Construction 2008  
Former Occupation/s with Company or Organization mm dd yyyy  
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