

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 p	orint the f	ollowing i	nformation so w	ve can help	you become a p	part of SIR:
KAL	POY			Williams	, ~	NONE	Wife's (or SO's) first name
First N	Name	Middle Initial	or Name	Last Name	Suffix	Nickname	Wife's (or SO's) first name
128	O C Home ad	LAKES/ idress	HORE N	HUBU City	IRN	95602	Evionorion
	AME Mailing Address					-	- CACHSIUN
570				City		ZIP	Extension
Area Code	160	F-325 lephone Number			CYM	Email Address (in CA	+ Cantil NE
Birth Date	11	26	_5_3	3	Wedding Ann	iversary 9	27 75
		00	уууу			mm	dd yyyy
Lwas int	roduood -		- 1 41 1			C -	1 +
l am reti	red from f	us a guest ull time en	at the lund Informent	cheon meeting du	iring the mo	nth of	sential for continued
member	snip. Tun	iderstand t	hat I must	attend at least o	ne-half of th	e regular lunched	n meetings (Ladies
Day or F	richics and	a Holiday I	_uncheons	s are excluded) w	ithin the pre	vious twelve con	secutive 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	g a lunche	on, notice	must be r	eceived by noon	the	before the l	i you will not be uncheon.
				-	Pal.	1/1/1	es A
7		. J.	C		Lady	cant's Signature	76
ーレ	Sponsor's Printe	Hedi d Name	<u> </u>	1. W. 19	DAL	our Hul	<u> </u>
			•	-0.0	Фрог	isus s'algitature	Badge No
<u> </u>	am a new	member	<check< td=""><td>whichever applies></td><td>lar</td><td>n transferring from</td><td>n Branch #</td></check<>	whichever applies>	lar	n transferring from	n Branch #
•				_		_	
How did	you hear	about Son	s In Retire	ement?	LIENd	1	
Supplyir	ng inform	ation abo	ut your fo	ormer business	or military	connection will	help us introduce
you to n	ew friend	is and ma	ke you av	vare of our man	y activities.		noip as narouace
TPU	ckia	<i>-</i>					•
— <i>F</i> <u>C</u>	Former Occupation	on/4	with	Company or Organiza	tion	mm dd Date Re	yyyy
I prefer to	o receive r	my monthl	y copy of a	our Branch news	letter: Pleas	e check your sele	
1 - ·	lectronica					May entail an add	
7		-		regarding the nex			лионаі спаіде)
		ee accept					•
		oo docopt				No. assigned	
			Mem	bership Chairma	n		
		Please	continue	to Activities	and Interes	sts on page 2	
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