

## 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

WESTGATE Branch 125

|   |   | Br                                 | anch Name         |  | NO                                    |  |
|---|---|------------------------------------|-------------------|--|---------------------------------------|--|
| Please  | print the follow                        | wing informatio                    | n so we can help  | you become a part                      | of SIR.                               |  |
| Yo  | ur first name                           | Initial                            | Last Name         | Nickname (Call me)                     | Wife's or Partner's first name        |  |
|   | Home Address (                          | Street, No. Apt)                   |                   | City                                   | Zip Code                              |  |
| ( )   |   |                                    |                   |  | I . $I$                               |  |
| Tel. Area   | Tel Number                              |                                    | E-Mail            | Birth Date                             | Wedding Anniversary<br>MM/DD/YY       |  |
| I attend<br>employ  | ed a luncheor<br>ment. I am aw          | n meeting on: _<br>are that regula | r attendance is e | and I have re<br>ssential for continue | tired from full time<br>d membership. |  |
|   |   |                                    |                   |  |                                       |  |
| Applicant's Signature   |   |                                    | Date              | Sponsor's Signat                       | ture Badge Number                     |  |
| I am a new member.  |   |                                    | ]                 | I am transferring from:                |                                       |  |
|   | owing informa<br>ctivities              | tion will help u                   | s introduce you t | o new friends and m                    | ake you aware of our                  |  |
| Former Business Connection:   |   |                                    | Occupation        | Company or Organization                |                                       |  |
| Date yo   | ou retired:                             |                                    | -                 |  |                                       |  |
| What a  | re your Hobbie                          | es and Interest                    | s?                |  |                                       |  |
| 1   | F                                       | or Membershi                       | p Committee Cha   | airman:                                |                                       |  |
|   | Mail Applica                            | tion To:                           |                   | Badge No.                              | Assigned.                             |  |
| Bart Benson<br>1530 Emory Street<br>San Jose, CA 95126-2019<br>(408) 292-3724 |   |                                    |                   | Date:                                  |                                       |  |
|   | AND AND DESCRIPTION OF ANY AND ADDRESS. |                                    |                   |  |                                       |  |