



SONS IN RETIREMENT

A NON-PROFIT Public Benefit Corporation for Retired Men devoted to the
Promotion of Independence and dignity of Retirement

Crystal Springs Chapter

142

Branch Name

Branch No.

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

First Name Initial Last Name Nickname Wife's Name

Home Address (Street, No. Apt) City State Zip Code

Mailing Address (Street, No. Apt) City State Zip Code
(If Different From Home Address)

()

Telephone No. E-Mail Address Birth Date

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

Applicant's Signature Date Sponsor's Signature Badge
[] I Am A New Member [] I Am Transferring From: _____ Number
Branch No.

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

Former Business Connection: _____
Occupation Company or Organization

Date You Retired: _____

What are your Hobbies and Interests: _____

For Membership Committee Chairman: _____ Badge Number Assigned: _____

Date: _____