



ITALIAN HERITAGE LODGE #2517, OSDIA, MEMBERSHIP APPLICATION

Regular membership is open to men and woman of Italian birth or descent and their spouses. **Social membership** is offered to all others interested in celebrating the Italian culture. **Minimum membership age** is eighteen, although younger family members are invited to several events. **Annual dues** are **\$35.00** for the first member of the household and **\$30.00** for each additional member, **plus a one-time \$5.00 application fee, each**. Membership begins on the first day of the month following the date of application. Please use separate form for each applicant and make check payable to: "Italian Heritage Lodge" and send with application to: IHL Financial Secretary, 8506 Strand Court, Springfield, VA 22151. For additional information please email info@italianheritagelodge.org.

Membership entitles the applicant to take part in all lodge activities and includes subscriptions to *La Bandiera* (the Lodge newsletter) and *Italian America* (the quarterly OSIA magazine). Please visit the lodge website, www.ItalianHeritageLodge.org, and the national OSIA website, www.osia.org, for scheduled activities, news and events.

Name _____ Occupation _____

Address _____

City _____ State _____ Zip Code _____

Telephone _____ E-Mail _____

Date of Birth _____ If married, date of anniversary _____

If married, name of spouse _____

Italian family name(s) _____

How did you learn about our Lodge? _____

Type of membership _____ Status _____ Gender _____
Regular _____ Social _____ Married _____ Single _____ Male _____ Female _____

Name & location of any other OSIA Lodge of which you have been a member _____

In hopes of facilitating member interactions, the council distributes a membership list. In appreciation for privacy concerns, the council will distribute the list to members only. Moreover, no one will be listed who states a preference to be omitted. You may omit specific contact information if desired.

Your signature indicates your agreement with our publishing the following information:

Your Name Your home address Your e-mail address Your telephone number

Our monthly newsletter will acknowledge your birthday and anniversary (month/day only)

Feel free to indicate anything you wish to be omitted.

I certify to the best of my knowledge, the information given is true and correct.

Signature _____ Date _____