



# Friendly Sons of St. Patrick

OF THE JERSEY SHORE

P.O. Box 254, Spring Lake, NJ 07762

## New Membership Application

Name: \_\_\_\_\_

Home Address: \_\_\_\_\_  
Street City Zip

Business Affiliation & Address: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Business Telephone: \_\_\_\_\_

Preferred Mailing Address (check one) ☐ Home ☐ Business

Preferred e-mail address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Wife's Name (if married) \_\_\_\_\_

Names & Ages of Children: \_\_\_\_\_

### Heritage Statement:

*List relatives born in Ireland through whose blood line the applicant acquires his Irish Heritage:*

Name:	Alive / Dead (check one)	Relationship	Country of Birth	Year Emigrated
_____	<input type="checkbox"/> <input type="checkbox"/>	_____	_____	_____
_____	<input type="checkbox"/> <input type="checkbox"/>	_____	_____	_____
_____	<input type="checkbox"/> <input type="checkbox"/>	_____	_____	_____
_____	<input type="checkbox"/> <input type="checkbox"/>	_____	_____	_____

I certify that the above statements are true to the best of my knowledge.

\_\_\_\_\_  
Date Signature

Recommended by: \_\_\_\_\_  
Member's Name

**Please submit \$75 Yearly Membership Fee with Application**

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