



# Friendly Sons of St. Patrick

OF THE JERSEY SHORE

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

## 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 \$50 Yearly Membership Fee with Application**