

# SMS APPLICATION FOR MEMBERSHIP

95 Ovid Street  
Seneca Falls, NY 13148

Phone #: (315) 568-6526

Date: \_\_\_\_\_

**Last Name:** \_\_\_\_\_ **First:** \_\_\_\_\_ **MI:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_ *(Cell or Land Line)* **Will You Receive Text:** *Yes or No*

**Date of Birth:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

**Occupation:** \_\_\_\_\_

**Father's Name:** \_\_\_\_\_

**Mother's Maiden Name:** \_\_\_\_\_

I to the best of my knowledge attest that the above Candidate for membership in the SMS is a person of good character and is interested in contributing to the benefit of the SMS and the Community.

**Date:** \_\_\_\_\_ **Signature of Sponsor:** \_\_\_\_\_

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We the undersigned certify that the applicant is accepted as a member of the SMS. Regular and Social Members are hereby to Pay **\$50 per year in dues**. Dues are due by **April 1<sup>st</sup>** of that year. A \$10 **late fee** will be added after April 1<sup>st</sup>.

**Date:** \_\_\_\_\_

**President:** \_\_\_\_\_ **Secretary:** \_\_\_\_\_

\_\_\_\_\_ **Regular Member**          \_\_\_\_\_ **Social Member**