



# Le CLUB CALUMET - MEMBERSHIP APPLICATION

334 West River Road, Augusta, Maine 04330

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**(Please print clearly and bear down, three copies are being made.)**

Please complete all requested information in the upper portion of this application. Failure to provide complete and accurate information may be cause for rejection or expulsion. Information in this section is used to determine your eligibility and is kept confidential.

Name of applicant \_\_\_\_\_

Physical address \_\_\_\_\_

Mailing address \_\_\_\_\_

City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

e-mail address \_\_\_\_\_

Home phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ \* Cellular: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ \* Business phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Are you a U.S. Citizen: Yes ( ) No ( ) - Are you a Franco-American: Yes ( ) No ( )  
Are either of your parents or grandparents of Franco-American origin? Yes ( ) No ( )

Paternal Father's full name \_\_\_\_\_ Maternal Mother's full maiden name \_\_\_\_\_  
*Certified birth certificate needed (mandatory)*

Grandfather's full name \_\_\_\_\_ Grandfather's full name \_\_\_\_\_  
*Certified birth certificate needed (mandatory)*

Grandmother's maiden name \_\_\_\_\_ Grandmother's maiden name \_\_\_\_\_  
*Certified birth certificate needed (mandatory)*

Occasionally family names have been changed and no longer resemble the "known" French name. If this is the case with this application, you must supply the membership committee with pertinent genealogical information to prove the French lineage. Failure to produce this information may affect your eligibility.

Felony Conviction? Yes ( ) No ( ) - Dishonorable Discharge (Military) Yes ( ) No ( )

If yes to either questions, please specify the type of felony or the type of discharge. \_\_\_\_\_

What is your occupation? \_\_\_\_\_

Can you Speak French? \_\_\_\_\_ Understand French? \_\_\_\_\_ Read French? \_\_\_\_\_ Write French? \_\_\_\_\_

Briefly describe what you have to offer to Le Club Calumet should you become a member. \_\_\_\_\_

If the Club needed your help, what are the best times during the week or weekend that you could volunteer your assistance to the Club \_\_\_\_\_

*I swear that the above information is true and correct and I hereby authorize the Membership Committee of Le Club Calumet to verify and investigate the data given on this application to determine my eligibility for membership.*

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Please attach a certified copy of your birth certificate. It must show a city, state or parochial seal.

APPLICATION FEE: \$50.00 -(Payable with the submission of this application. It will be refunded if not accepted.)

Sponsored by: Print: \_\_\_\_\_ Signature: \_\_\_\_\_

Recommended by: Print: \_\_\_\_\_ Signature: \_\_\_\_\_ and Print: \_\_\_\_\_ Signature: \_\_\_\_\_

(An applicant **MUST** be sponsored by one member and recommended by two members.

Reviewed and recommended \_\_\_\_\_ not recommended \_\_\_\_\_ by the membership committee on \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature of membership committee chairman: \_\_\_\_\_

Signature of membership committee members: \_\_\_\_\_ and \_\_\_\_\_

Signature of Club President: \_\_\_\_\_

An application fee of \$ \_\_\_\_\_ was received on \_\_\_\_/\_\_\_\_/\_\_\_\_ by Financial Secretary. Signed: \_\_\_\_\_

Voted at the meeting of \_\_\_\_/\_\_\_\_/\_\_\_\_ was notified for initiation of \_\_\_\_/\_\_\_\_/\_\_\_\_ was initiated on \_\_\_\_/\_\_\_\_/\_\_\_\_