

## Membership Application

The classification of membership is Resident member. This application must be signed by two (2) members recommending the applicant and forwarded with a letter of recommendation from each of the proposing members to:

The Secretary  
the Fay Club  
658 Main Street  
Fitchburg, MA 01420

This form must be filled out completely.

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

I have reviewed the By-Laws and agree to comply with its regulation.

NAME: \_\_\_\_\_ SPOUSE'S NAME: \_\_\_\_\_  
(Please Print)

RESIDENCE: \_\_\_\_\_ TELEPHONE NUMBER: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

NAME OF BUSINESS: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

POSITION IN BUSINESS: \_\_\_\_\_

MEMBERS SPONSERING: \_\_\_\_\_  
(2 Sponsors)

\_\_\_\_\_

RECEIVED BY SECRETARY, DATE: \_\_\_\_\_

APPROVED BY ADMISSIONS COMMITTEE: \_\_\_\_\_