

New



DROPPED
LACK OF ATTENDANCE
9/95
REINSTATED 11/4/96

A Non-Profit Organization For Retired Men Devoted to the Promotion of Independence and Dignity of Retirement

APPLICATION FOR MEMBERSHIP IN (OR TRANSFER TO)

New Twain Harte Branch No. 172 Sons In Retirement, Inc.

Applicant please print the following information for the record:

Name Robert W. Fifield Nickname (Call me) Bob Wife's first name Virginia

Address (Street, no., apt.) Box 71 Phone 586-3506

City Twain Harte Zip Code 95373

I was introduced as a guest at the luncheon meeting on 2/3/93 Date

Birthday Jan 16, 1923 Wedding Anniversary June 7

I am retired from full time gainful occupation. I understand that attendance is important and that I may be dropped from the rolls if I miss three consecutive meetings or attend less than seven meetings in twelve months, without notifying the Attendance Chairman, giving a valid reason.

Applicant's signature Robert W. Fifield Date _____ Sponsor's signature _____ Badge No. _____

If this is an application to transfer from another Branch, please give Branch No. from which you are transferring: No. _____

Former Business Connection: Superintendent of Schools

Hobbies: _____

Badge No. Assigned 40 99

Date 1/8/94