



**AOH DIVISION 17 2012 MEMBERSHIP FORM**  
**Annual Dues \$40 (New Members \$55)**



Please type or print clearly

**Full Name**.....

**Address**.....

**City**..... **State**..... **Zip Code**.....

**Occupation**.....**Parish**.....

**Home Phone**.....**Mobile Phone**.....

**E-Mail Address**.....

Age ..... Date of Birth ...../...../.....

**Membership #30NA17.....**

Members Signature ..... Date ...../...../2012

**PLEASE NOTE IF YOU HAVE A VALID EMAIL ADDRESS ALL ROUTINE CORRESPONDENCE WILL BE SENT ELECTRONICALLY**

**PLEASE NOTIFY US OF ANY CHANGES**

**RECORDING SECRETARY:**

**FINANCIAL SECRETARY:**

I hereby certify that member's information was recorded into  
the division database

I hereby certify that the member has paid their 2011 dues

.....  
Recording Secretary' Signature

.....  
Financial Secretary's Signature

Date ...../...../2012

Date ...../...../2012

FS USE CHECK #..... MO#.....Cash.....

AOH Div 17 Saint Brendan the Navigator  
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 Info@sbnaoh.org