

DUNWORKIN CLUB

Membership Application

Name:		Date:		
Address:	Apt:	Town:	State:	Zip:
Phone:		Email:		
Place of birth:		Date of birth:	Date of retirement:	
Educational:				
Professional career:				
Military Service:				
Interests, Accomplishments, Hobbies and/or Other Biographical Information:				

I understand that as a member I will have opportunities to participate on club committees, including on the Executive Committee.

Club dues are \$75 per year payable by December 31 for the following year. However, members inducted on or after May 1 are not required to pay dues for that year.

Date: _____ **Signature:** _____

Sponsor shall obtain the following signatures (Note: sponsor must be a member for at least one year). Mail or give completed form to Diane Frohling, 138 Leonardo Drive, West Orange, NJ 07052 (973) 325-5850 difrohling@gmail.com	
Sponsor:	Date: