

The Polish Century Club of Detroit, Inc.

Application for Membership

Applicant Information

Name: _____

Address: _____

Phone (Land): (_____) _____ (Mobile): (_____) _____

Email Address: _____@_____

Date of Birth: ____/____/____ Place of Birth _____

U.S. Citizen? Yes____ No____ Married: Yes____ No____

Wife's First Name _____ Wife's Date of Birth: ____/____/____

In the Last 10 Years, Have You Been Convicted of a
Criminal Offense Other Than a Minor Traffic Violation? Yes____ No____

Are you of Polish Descent: Yes____ No____

Father's Name _____

Mother's Maiden Name _____

Are you related to a current or past Member of the PCC? Yes____ No____

If Yes, Who? _____

Applicant

Signature: _____

Sponsor Validation

Sponsor Name: _____

Signature: _____

Why Do You Sponsor This Applicant?

Screening Committee

Date of Interview: ____/____/____

Notes: _____

Approve for Membership? Yes____ No____

Chairman of Screening Committee:

Signature _____