



# The Downriver Italian-American Club®

P.O. Box 1797 ♣ Southgate, MI 48195-0797 ♣ website: www.diac.us ♣ E-mail: diac1971@gmail.com

(For people of Italian heritage ONLY)

## Domanda D' iscrizione per Membri Application for Club Membership

(Per gente di eredità Italiano)

I, the undersigned, hereby apply for membership in the Downriver Italian-American Club

Nome: \_\_\_\_\_ Data di Nascita: (M/D/Yr) \_\_\_\_\_  
Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Marito/Moglie: \_\_\_\_\_ Data di Nascita: (M/D/Yr) \_\_\_\_\_ Anniversario: (M/D/Yr) \_\_\_\_\_  
Spouse (Maiden) Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Anniversary: \_\_\_\_\_

Indirizzo: \_\_\_\_\_ Telefono (casa) \_\_\_\_\_  
Address: \_\_\_\_\_ Telephone (home): ( ) \_\_\_\_\_

Citta: \_\_\_\_\_ Stato: \_\_\_\_\_ Codice Postale: \_\_\_\_\_ Telefono (cell) \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_ Telephone: ( ) \_\_\_\_\_

E-Mail Indirizzo: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_

Luogo di Nascita: \_\_\_\_\_  
Place of Birth: \_\_\_\_\_

Citta \_\_\_\_\_ Provincia \_\_\_\_\_ Nazione \_\_\_\_\_  
City \_\_\_\_\_ Province \_\_\_\_\_ Country \_\_\_\_\_

Cittadinanza: \_\_\_\_\_ Impiego: \_\_\_\_\_  
Citizenship: \_\_\_\_\_ Occupation: \_\_\_\_\_

Stato Civile: Celibe/Nubile Sposato/Sposata Vedovo/Vedova  
Marital Status: Single [ ] Married [ ] Widower/Widow [ ]

Titolo di Studio: Elementare Media Scuole Superiori Università  
Education: (Optional) Elementary [ ] Secondary [ ] High School [ ] University [ ]

Se Laureato, Indicare la Laurea: \_\_\_\_\_  
If Graduated, Specify Degree: \_\_\_\_\_

Figli meno di 18 anni: \_\_\_\_\_ Eta: \_\_\_\_\_  
Children under 18 years: \_\_\_\_\_ Age: \_\_\_\_\_

**Do not write in the block below:**  
Membership Date: \_\_\_\_\_  
Membership Chairperson: \_\_\_\_\_

Recomandato da: \_\_\_\_\_  
Recommended by (Member in Good Standing): \_\_\_\_\_

Se sei il figlio e figlia di un membri del DIAC, indicate il nome: \_\_\_\_\_  
If you are a son or daughter of a DIAC member, please list their name(s): \_\_\_\_\_

Date: \_\_\_\_\_ Firma: \_\_\_\_\_  
Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Tassa annuale: Coppia: Individuale: Pagabile da 1 Gennaio al 31 Marzo, di ogni anno.  
Yearly dues: Couple: \$60.00 Individual: \$30.00 Payable from January 1 to March 31th, of each year.

Membership Initiation fee: \$100.00 for a couple and \$50.00 for a single member. Initiation fee for a son or daughter of a Club Member: \$25.00. (Payment will be refunded if membership is denied.) Full payment must be submitted with this application.

(Dues are prorated after June 30th.) FORM REVISED/APPROVED: 2/9/2016

**If you have any questions, please call:** Frank Giannotti (Financial Corresponding Secretary) – (734)283-7394  
**Please Return Form and Payment Payable to:** Downriver Italian American Club, P.O. Box 1797, Southgate, MI 48195-0797

For office use only:  
Date Accepted: \_\_\_\_\_ Amount of Check: \_\_\_\_\_ Check # \_\_\_\_\_ Cash: \_\_\_\_\_ DIAC Receipt #: \_\_\_\_\_