



MEMBERSHIP APPLICATION

DOWNRIVER ITALIAN-AMERICAN CLUB

P.O. Box 1797 ♣ Southgate, MI 48195-0797 ♣ Tel. (734)282-1257 ♣ Web: www.diac.us ♣ E-mail: diac1971@gmail.com

(For people of Italian heritage ONLY)

**Domanda D' iscrizione per Membri
Application for Regular 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 [] Widow/Widower []

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: _____

Form Revised/Approved: 1/7/2025

Tassa annuale: Coppia: Individuale: Pagabile da 1 Gennaio al 31 Marzo, di ogni anno.
Yearly dues: Couple: \$80.00 Individual: \$40.00 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. The Initiation Fee for a Son or Daughter of an Active Club Member(s) in Good Standing is \$25.00 per single member; \$50.00 per couple. (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: 2/9/2020

If you have any questions, please call: Frank Giannotti (Financial Corresponding Secretary) – at (734)283-7394
Return this Form & Payment Payable to: Downriver Italian American Club, 14823 Williamsburg Dr., Riverview, MI 48193-7703

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