

**FINANCIAL SECRETARY
THE IRISH AMERICAN CLUB**

NAME LAST: _____ FIRST: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP _____

TELEPHONE: (H) _____ WORK: _____ FAX: _____

E-MAIL: _____ OCCUPATION: _____

PLEASE INDICATE (X) IF YOU WOULD LIKE TO HELP ON ONE OF THE COMMITTEES:

NEWSLETTER: _____ ENTERTAINMENT: _____

MEMBERSHIP _____ EDUCATIONAL _____

ST. PATRICK'S CELEBRATIONS _____

OCCASIONAL HELP:

BAKING: _____ FUNCTIONS: DOOR: _____

SET UP: _____ CLEAN UP: _____

ANNUAL DUES (JANUARY THROUGH DECEMBER)

\$20 PER INDIVIDUAL MEMBER: \$ _____

\$10 FOR SENIORS OVER 65: \$ _____

THIS FORM CAN BE MAILED TO:

**FINANCIAL SECRETARY
IRISH-AMERICAN CLUB
6117 41ST AVENUE
HYATTSVILLE, MD 20782**

SPONSORED BY: _____

MEMBER'S NAME