



**P.O Box 21736 Hilton Head Island, SC 29925**

**MEMBERSHIP APPLICATION**

Applicant's Name \_\_\_\_\_ DOB \_\_\_\_\_

Spouse's Name \_\_\_\_\_ DOB \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Secondary Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Home town \_\_\_\_\_

Email \_\_\_\_\_ How long have you lived in the area? \_\_\_\_\_

Business Affiliation \_\_\_\_\_ Phone \_\_\_\_\_

Business Description \_\_\_\_\_

Clubs or Activities \_\_\_\_\_

Volunteer opportunities (Circle your choices): Bocce tournament, Sunday dinner, Italian Festival, Zin Fest, Opera night, Golf tournament, marketing/communications, club socials

Club Sponsor Name \_\_\_\_\_

Shirt Size (circle): Men's Women's S M L XL XXL

Yearly Dues: \$140.00

After October: \$50.00

Applicant's Signature \_\_\_\_\_ Date Submitted \_\_\_\_\_

Return to : IACHHI P.O. Box 21736, Hilton Head Island, SC 29925

For More Information contact John DeCecco, 401-524-1416, or cecco3@yahoo.com

Date Approved \_\_\_\_\_