

Membership Application

G. Marconi Society
 420 Albert St. W.
 Sault Ste Marie, Ontario Canada
 P6A 3C3



FIRST NAME	LAST NAME
ADDRESS	
CITY	PROVINCE
POSTAL CODE	PHONE
EMAIL	
DATE OF BIRTH	
OCCUPATION	
MARITAL STATUS	SPOUSE /PARTNER NAME
TYPES OF MEMBERSHIP Check one MEMBER _____ STUDENT MEMBER _____ HONORARY MEMBER _____	FEE FOR YEARLY MEMBERSHIP MEMBER \$30 STUDENT 18 YEARS OF AGE \$10 HONORARY MEMBER No Fee
To this purpose I swear on my honour and on my conscience that I promise to conform to and obey the bylaws of the said club and submit to the decision of the majority and it's authorities	
Name of Applicant	Signature
DATE	
Members are encouraged to participate in G. Marconi Society events and activities	