

Membership receipt is good for 60 days and is contingent on membership approval.

ARIZONA AMERICAN ITALIAN CLUB

7509 North 12th Street, Phoenix, Arizona 85020

Phone: 602-975-8294 • Email: azamerital@aol.com Fax: • 602-331-8123

NEW Website: azaiclub.com

APPLICATION FOR MEMBERSHIP

Please Print Legibly

Are husband/wife/partners joining together? Yes No

IF YES, each person must fill out an application form.

ALL ITEMS MUST BE FILLED OUT OR APPLICATION WILL BE REJECTED.

Name: _____ Birth date (including year) _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (_____) _____ Cell Phone: (_____) _____

Email Address (**print legibly**): _____

Are you of Italian descent? Yes No Is your father of Italian descent? Yes No

Father's last Name: _____ Mother's Maiden Name: _____

Have you ever been convicted of a felony? Yes No

If yes, please explain _____

Are you a Member of any other Club? Yes No

If Yes, List Other Club Affiliations/Locations: _____

Hobbies / Interests: _____

Are you willing to contribute volunteer time? Yes No

Employment Information:

Employer: _____ How Long? _____

Business Address: _____ Phone: (_____) _____

City: _____ State: _____ Zip: _____

IMPORTANT: How Did You Hear About Our Club?

Member/Friend Drove By/Live By Newspaper/Flyer Other _____

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OATH

I, (print Applicant's name) _____ do hereby declare the preceding statements are true and I understand any false statement will result in my immediate expulsion. Applicant swears to uphold all rules and regulations of the AAIC organization. Violation of such could result in suspension or revocation of privileges.

This Application must be completed by Applicant and accompanied by annual dues:

\$100.00 for Single Members

\$150.00 for Couples

A rejected applicant's dues will be returned by the AAIC. If the applicant decides to resign of his/her own free will from AAIC, DUES ARE NON-REFUNDABLE.

By affixing my signature to this Application, I do swear allegiance to the Arizona American Italian Club, the State of Arizona, and the United States of America.

Applicant Signature: _____

Date Signed: _____

Sponsored by:

Signature: _____

Printed Name: _____

Sponsor must be a Regular Member of Italian descent and has reviewed the application before affixing his/her signature as sponsor.

**THIS APPLICATION REMAINS THE PROPERTY OF THE
ARIZONA AMERICAN ITALIAN CLUB**

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Code of Conduct

Arizona American Italian Club

All members of the Arizona American Italian Club, employees, and guests are to comply with the Code of Conduct of the Club. Failure to do so will result in disciplinary action as outlined in Article VIII, Section 4 of the Club's bylaws:

1. Be truthful in all of your communications.
2. Behave cooperatively, honestly, and with integrity of character in the course of representing or conducting business within or on behalf of the Club.
3. Act with care and diligence in the course of utilizing and/or working with the club.
4. Treat other members, employees, and guests with respect, dignity, and courtesy, and without harassment.
5. Take reasonable steps to avoid conflict of interest, whether real or apparent, in all of your Club business and activities.
6. Do not start or make rumors, disparaging remarks about the Club and its members, staff, volunteers, and the Board through electronic means, such as social media and internet postings. In addition, disparaging remarks to vendors and suppliers of the Club, whether it be on premise or outside the Club, will be cause for disciplinary action by the Club.

I further understand that membership in another Italian Club and being on their Board or on a Committee may disqualify me from being a member of AAIC due to a conflict of interest, therefore, my continued membership is subject to review and consideration by the AAIC Board. **I also hereby acknowledge that if I become a member in another Italian Club at any time after I have joined the AAIC, it is mandatory that I immediately advise the Board by way of written communication so that my membership status in AAIC can be reviewed. Failure to notify may result in revocation of my membership status.**

Agreed To By (Signature): _____

Printed Name: _____

Date Signed: _____