

**OSTERVILLE MEN'S CLUB
P.O. BOX 503
CENTERVILLE, MA. 02632**

MEMBERSHIP APPLICATION

Applicants must live in Barnstable County and be recommended by a current member and the membership chairman.

Members are required to attend three regular meetings and or club social events during each calendar year.

The OMC mission is to promote sociability among its members and to support, by scholarship and otherwise, the educational and charitable objectives of selected individuals and organizations.

Please provide a brief description of your present or previous occupation (if retired) Public or military service, special awards and honors, hobbies and other interests. _____

NAME (please Print) _____ **Nickname** _____

Street Address _____ **P.O. Box** _____

Town _____ **ZIP** _____ **Phone** _____

E-MAIL _____

Applicant's Signature _____ **Date** _____

Member Sponsor _____ **Date** _____

Membership Chariman _____ **Date** _____

Please Mail application and Annual Dues of \$40 to the address above.

Date application & Dues Received ___/___/___ *Sent to Treasurer* ___/___/___

Date entered into membership ___/___/___