



*The Society of The friendly Sons of St. Patrick
on Long Island, New York*

APPLICATION FOR MEMBERSHIP

The Society of the Friendly Sons of St. Patrick on Long Island is an organization comprised of Sons of Erin and/or their descendants, who are business owners, executives, professionals or leaders in the community on Long Island.

We are interested in the economic development of Ireland as well as the Long Island region and the promotion of the rich culture of our ancestors.

Our ends are also philanthropic and charitable, devoted to the betterment of our less fortunate brethren, both here and in Ireland.

We encourage Irish-American leaders in business, the professions, labor, education, religion, culture, government and public/civic life, living or working on Long Island, to seek active membership in
“*The Friendly Sons.*”

Please complete this application in full (and attach a curriculum vitae, if necessary) and submit with \$100.00 fee payable to The Friendly Sons and mail to the Membership Chair:

The Society of the Friendly Sons of St. Patrick on Long Island, NY
Michael O'Reilly
3 Seitz Avenue
Rockville Centre, NY 11570

I, _____ hereby apply for **Membership** **Reinstatement** in *The Society of the Friendly Sons of St. Patrick on Long Island, NY*. [The \$100 shall be applied toward initiation for new members and toward dues for members to be reinstated. All members, including reinstated members on the membership role on August 15, shall be billed for dues for the following calendar year.] Membership dues are \$100 per year.

Spouse's name: _____ Home Phone: _____ E-mail: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Company/Organization: _____ Your Title/Position: _____

Business Address: _____ City: _____ State: _____ Zip: _____

Bus. Phone: _____ Fax : _____ E-mail: _____

Mailing preference: Home Business _____ Citizenship: USA IRE OTHER: _____

Date of Birth: _____ Place of Birth: _____

Father's Name: _____ Place of Birth: _____

Mother's Name: _____ Place of Birth: _____

Details of Irish Ancestry:

Maternal: _____

Paternal: _____

Organizations: _____

Affiliations: _____

Other Information (Family Members, Previous Employment, Military Service, etc.):

Sponsor : _____ Phone: _____ E-mail: _____

Second: _____ Phone: _____ E-mail: _____

Date: _____ Signature: _____

Date Approved By the Board of Governors: _____ Secretary's Initials: _____

Cash (or) Check #: _____ Amount: _____