



Italian Cultural Center of Western Massachusetts, Inc.



Membership Application

Dear Friend:

Here is your membership application form for the Italian Cultural Center of Western Massachusetts, Inc. This form, along with the required dues, will validate your membership for 2017.

Please select a membership category.

Senior (62 & over)	_____	\$ 30.00
Individual	_____	\$ 40.00
Family (1 or 2 adults with children under 18)	_____	\$ 70.00
Patron	_____	\$100.00
Friend	_____	\$150.00
Benefactor	_____	\$250.00 or more

Please complete this form and submit it and the corresponding dues amount to:

Italian Cultural Center
of Western Massachusetts, Inc.
56 Margaret St
Springfield MA 01105

Name: _____ Date of birth: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

If you have registered as a Family, please list the name of your spouse/partner and the names of children under the age of 18 and their dates of birth so they can be included with your membership.

Spouse/Partner: _____ Date of birth: _____

Child: _____ Date of birth: _____

Child: _____ Date of birth: _____

Child: _____ Date of birth: _____

Refer a friend

Name: _____

Address: _____

(Please see other side ⇨)

56 Margaret St., Springfield, MA 01105 * (413) 784-1492 * iccwm@comcast.net * www.iccwm.org

The ICC is a Tax-Exempt 501(c) (3) non-profit organization. Contributions to the ICC are tax deductible.