The Irish-American Club of Tulsa

Membership Application

Date			
Name	Last		
Address			
City	State	Zip	
Home Phone ()	Cell Pho	ne ()	
Email			
Please select one:			
() New Membership	() Renewal of Memb	ership () Name/Address Change
Type of Membership:			
() Individual (\$20) *family membership consists of pa			sorship (\$75)
For Family Membership plea	ase list immediate famil	-	
Would you like to serve on a	a committee? Please cho	oose one:	
() St. Patrick's Day Celebra	ation () Finance Co	mmittee () Election Committee
() Membership Committee	e () Irish Festiv	al Committee	

Make Checks payable to "IACT".

Mail to: Irish-American Club of Tulsa, PO Box 470865 Tulsa, OK 74147-0865

