

APPLICATION FOR MEMBERSHIP

Mr Mrs	Ms Dr.	Other	_
Name			
(one name only pleas			
Address	Town _	State	Zip
Home #	Work #	Mobile #	
Date of Birth			
Email Address			
Spouses name	Spouse	email address	
Children's Names	<u></u>	Date of Birt	h
Employer			
Occupation:			
Name of Proposer 1:			
Name of Proposer 2:			

This form will be forwarded to The Lanam Club, Attn: Geoff Piva, PO Box 8, Andover, MA 01810

I acknowledge and agree that, if my application is approved by the Board of Directors, a one-time initiation fee of \$750 with a one (1) year commitment to membership will apply, along with monthly dues payable of \$175 per month. Also, a monthly fee of \$50 is added to our Club Enhancement Fund/Debt Fund. Finally, a minimum food and beverage expense of \$100.00 for 10 months (excluding January and July).

Signature of Applicant: ______

For Office Use Only:
Member #
Effective Date