

Serra Club of St. Louis **New Member Application**

Applicant Information

| Name (print) | Preferred first name (for name tag, directory, etc.) | |
|-----------------|--|--|
| Date of birth | Parish | |
| Email address | Phone numbers Cell: Home: | |
| Mailing address | City, State, ZIP | |
| Spouse name | Is spouse already a Serran? Yes No | |

| Sponsor Information | | |
|---------------------|--|------|
| Sponsor name | Sponsor signature | Date |
| Pastor name | Pastor signature (or witness to pastor's approval) | Date |

I hereby apply for membership in the Serra Club of Saint Louis, Missouri. If accepted, I pledge to maintain an active interest in Serra, attend meetings regularly, participate in the club's vocation to service and to do my best to share the membership with others.

Applicant Signature _____ Date _____

Please mail or deliver completed form to the Serra VP of Membership: Dan Dykas

2422 Fairoyal Drive, St. Louis, MO 63131 – dadykas@sbcglobal.net – (314) 614-2380