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: David Brigham

946 Delvin Drive, St. Louis MO 63141 – DWB3145@aol.com – (314) 541-3348