Italian Heritage Society of Indiana Membership Application

(First Name) (please print) (Last N		ame) (Date)			
First Name Spouse/Partner) (Last N		ame) (Region/	City of Family It	alian Heritage)	
(Street Address)		(City)	(State)	(Zip)	
(Primary Phone)	(Secondary Pho	one)	(E-mail)		
Type of Membership: □ Rene	wal □ New				
□ Indiv	idual (\$30/yr.) □ Family (\$45/	yr.) (incl. children unde	r 21) Business/	Corporate (\$250/yr	:.)
DONATIONS are a tremendo	us help to our budget and tax of	eductible. Yes! I donat	e \$		
Any additional donations are a social, educational, and culture			•		
scholarship opportunities for r		•		oners	
	(P	Volunteer Opportur lease check all that are of			
	(1	lease effect aff that are of	micrest)		
☐ Bocce	☐ Book Club	☐ Cultural Comm	ittee	m Club	☐ Italian Language
☐ International Festival	☐ Italian American Golf Tournament	☐ Membership Committee	☐ Me	edia Relations / R	☐ Newsletter
☐ POW Chapel	☐ Seniors	☐ Website	☐ Yo	oung Adults	

Send your completed application with check or money order to: Italian Heritage Society of Indiana, Post Office Box 80032, Indianapolis 46280 OR login to https://www.italianheritage.org/membership to register online.