

MEMBERSHIP APPLICATION

Name _____ Application Date _____

Address _____

City/State _____ Zip Code _____

Email _____ Tel # _____

Are you of Lithuanian descent? ____ If yes, original family name _____

Is your spouse/partner a member? ____ If yes, member name _____

Are you a US citizen, possess green card or work/student visa? _____

Sponsors 1. _____

2. _____

Your Signature _____

Membership Eligibility

1. Membership in the association shall be of the following categories:
 - a. Regular Member
 - b. Special Member
2. The following must be met to be eligible to become regular members of this association:
 - a. Any person of Lithuanian descent regardless of religious or political beliefs and
 - b. Applicant must be a citizen of the United States or possess a green card for permanent residency or possess a working or student visa.
3. The following must be met to be eligible to become special members of this association:
 - a. Any person of non-Lithuanian descent who is married to a Lithuanian and item 2b above.
4. Must be sponsored by two regular members of the association
5. Mail Application to: SBLCA – Membership
 368 West Broadway
 So. Boston, MA 02127

Regular and Special Membership Annual Dues \$24.00

Write Nothing Below

1. Director's Approval _____

2. Director's Approval _____

Date Approved _____ Member Number _____