## MEMBERSHIP APPLICATION

Name $\qquad$ Application Date $\qquad$
Address $\qquad$
City/State $\qquad$ Zip Code $\qquad$
Email $\qquad$ Tel \# $\qquad$
Are you of Lithuanian descent? $\qquad$ If yes, original family name $\qquad$
Is your spouse/partner a member? ____If yes, member name $\qquad$

Are you a US citizen, possess green card or work/student visa? $\qquad$
Sponsors 1. $\qquad$
2. $\qquad$
Your Signature $\qquad$

## 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 $\$ 40.00$

Write Nothing Below

1. Director's Approval $\qquad$
2. Director's Approval $\qquad$
Date Approved $\qquad$ Member Number $\qquad$
