



**AMERICAN SOKOL**  
Educational and Physical Culture Organization  
**APPLICATION FOR MEMBERSHIP**

Date: \_\_\_\_\_

Sokol: **SOKOL MILWAUKEE**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip+4: \_\_\_\_\_

Res. Phone: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Married  Single

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

City, State, Country of Birth: \_\_\_\_\_

\*\*\*\*\* **OPTIONAL INFORMATION** \*\*\*\*\*

Spouse: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Children (Names & Ages) \_\_\_\_\_

List types of gymnastic or cultural activities and Programs you would support and participate in as a Sokol Milwaukee Member

STATEMENT: Upon admission to membership, I promise to be governed by the By-Laws of the American Sokol Organization and my local Unit in all my activities on their behalf.

Signature of Applicant: \_\_\_\_\_

\*\* A Sokol Milwaukee Annual Membership Fee of \$45.00 and one time ASO (American Sokol Organization) Registration Fee of \$15.00 - **(\$60.00 Total)** is due on or before the first general membership meeting at which the applicant is presented to the membership for acceptance and a brief swearing-in ceremony. General Membership Meetings are held the first Monday of the month (September thru June), from 7:00 pm to approximately 9:00 pm, at the Norway House – 7507 W. Oklahoma Avenue, Milwaukee, Wisconsin.