

Send completed form to the mailing address below or email ItalianAmericanHC@gmail.com
OR This form can also be completed on-line at www.italianamericanhc.org/members



ITALIAN AMERICAN HERITAGE CLUB OF HUNTERDON COUNTY

Post Office Box 2466
Flemington, New Jersey 08822

Date _____ (year optional)
Name _____ Birth Date ____/____/____
Spouse Name _____ Anniversary: ____/____/____ BirthDate ____/____/____
Address _____

Contact Info

Home _____ Cell _____ Work _____
Email _____

Interests/Hobbies _____

Ancestry(if known):

Town: _____ Province: _____ Region: _____

How did you hear about us? _____

Membership is open to all adults 18 years of age and older, born in Italy or the descendants of those of Italian heritage as well as the spouses of those of Italian lineage and their children whether natural, adopted or fostered.

Select one or more committees in which you would be willing to participate:

Social _____ Fund Raising _____ Golf Outing _____ Gala _____
Program _____ Public Relations/Social Media _____

Your contact information will be shared with club members. Contact information may not be used for solicitation or business purposes and is strictly prohibited.

Dues: **\$40 per year**- Due January of each year. Make check payable to **IAHCHC** and send it to:
IAHCHC, Treasurer, PO Box 2466, Flemington, NJ 08822

or

Pay on-line at: www.italianamericanhc.org/members