

Application for Membership into the American Turners

<u> </u>	, seek acceptance into
(Name)	(Society Name)
of the	district.
Personal Information:	
Address:	City, State, Zip:
Telephone Number:	
Email Address:	
Date of Birth:	
I am currently interest	ed in: (Check all that apply)
BasketballVolleyball	GymnasticsVolunteeringPhotographyBags/Cornhole Tournaments
Flag FootballBowling	SoftballDancingHobby CollectingEndurance Races/Fun Ru
PaintballGolf	TennisWebsite DesignEssay Writing
PickleballMartial Arts	Track and FieldSocial FunctionsPainting
Proposed and Sponsor	ed by:
Sponsored by:	