



Germania Park of New Jersey Inc.

Rockaway, NJ

Membership Application

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE \_\_\_\_\_ ZIP: \_\_\_\_\_

EMAIL: \_\_\_\_\_ PHONE # \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ EMPLOYER: \_\_\_\_\_

DO YOU SPEAK GERMAN? \_\_\_\_\_ DO YOU WRITE GERMAN: \_\_\_\_\_ COUNTRY OF BIRTH: \_\_\_\_\_

NAME OF SPOUSE: \_\_\_\_\_ NAMES OF CHILDREN: \_\_\_\_\_

TALENTS & HOBBIES: \_\_\_\_\_

ARE YOU WILLING TO VOLUNTEER TIME FOR CLUB ACTIVITIES? \_\_\_\_\_

HAVE YOU EVER BEEN A MEMBER OF GERMANIA PARK BEFORE? \_\_\_\_\_ YOUR PARENTS? \_\_\_\_\_

ACTIVE MEMBER SPONSORS (2 REQUIRED)

PRINT: \_\_\_\_\_ SIGN: \_\_\_\_\_ PRINT: \_\_\_\_\_ SIGN: \_\_\_\_\_

SIGNATURE OF APPLICANT: \_\_\_\_\_

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MEMBERSHIP DUES: \$60 PER YEAR DUE IN JANUARY (PRORATED WHEN JOINING MID YEAR)

MUST BE 18 OR OLDER TO JOIN.

INITIATION FEE: \$15 DATE PAID: \_\_\_\_\_

DATE ACCEPTED AS MEMBER: \_\_\_\_\_ MEMBERSHIP DUES PAID: \_\_\_\_\_