



Application For Membership

Date _____

TO THE BOARD OF DIRECTORS
CASINO ESPANOL DE CEBU
CEBU CITY

Sirs

The undersign hereby applies for membership subject to the Rules, Regulations, and Amended By-Laws of the Club.

Respectfully,

(printed name of Applicant)

signature

Propriety Ownership Certificate Number: _____

Note: This application must carry recommendation and endorsement of two DE NUMERO MEMBERS

ENDORESMENT AND RECOMMENDATION

The undersign hereby endorse this application by the applicant for admission as a/an _____ member in accordance with the rules, regulations, and Amended By-Laws of the Club.

Name and Signature of member

Name and Signature of member

DE NUMERO Acct. No. _____ DE NUMERO Acct. No. _____

BIOGRAPHICAL DATA OF APPLICANT

Name: _____ Nickname: _____

Date of Birth: _____ Age: _____

Home Address: _____

Civil Status: _____ Tel. No. _____

If Married give Spouse's Name: _____

Date of Birth: _____

Children: _____ Blood Type: _____

Name	Date of Birth:
_____	_____
_____	_____
_____	_____

Connected With _____
(Company)

Position in Company: _____

Years in Company: _____

Address: _____

Company Telephone: _____

Character Reference: (Other than Sponsoring members)

a. _____

b. _____

c. _____

Credit References: (Banks, etc.)

a. _____

b. _____

Club Affiliations

a. _____

b. _____

Comments: (not to be filled in by applicant)

Approved - At Board Meeting on _____

Denied - " _____

Shelved - " _____

Assigned Account No. _____

Attest

SECRETARY