

**THE ATLANTA**



**BLACK TIE CLUB**

**2424 Ballantrae Circle**

**Cumming GA, 30041**

**APPLICATION FOR MEMBERSHIP**

PLEASE PRINT

NAME: \_\_\_\_\_ NICKNAME: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIPCODE: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

PHONE NUMBERS: HOME \_\_\_\_\_ OFFICE \_\_\_\_\_

DATE OF BIRTH: MONTH \_\_\_\_\_ DAY \_\_\_\_\_

NAME OF EMPLOYER OR BUSINESS: \_\_\_\_\_

TITLE OR POSITION HELD: \_\_\_\_\_

PLEASE CHECK ONE, ARE YOU BETWEEN: 45-50  50-55  55-60  60-65  65+

ARE YOU SINGLE? \_\_\_\_\_ YES \_\_\_\_\_ NO (MEANING DIVORCED, WIDOWED, WIDOWER OR NEVER HAVING BEEN MARRIED)

PLEASE TELL US SOMETHING ABOUT YOURSELF INCLUDING SUCH THINGS AS SCHOOLS ATTENDED, SPECIAL INTERESTS, ACHIEVEMENTS, CIVIC & SOCIAL ACTIVITIES, ETC. (CONTINUE ON BACK IF NECESSARY). YOUR SIGNATURE GRANTS PERMISSION FOR THE BOARD TO VERIFY THE INFORMATION PROVIDED.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

INITIATION FEE FOR MEMBERSHIP IN THE ATLANTA BLACK TIE CLUB IS \$100.00 AND ANNUAL DUES ARE \$175.00. PLEASE SEND YOUR COMPLETED APPLICATION ALONG WITH YOUR CHECK PAYABLE TO THE ATLANTA BLACK TIE CLUB, IN THE AMOUNT OF \$275.00 TO:

Ms. Rose Gasper  
3805 Newport Bay Dr.  
Alpharetta, GA 30005

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
SPONSOR'S NAME (PLEASE PRINT)

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SPONSOR'S SIGNATURE

**PLEASE ATTACH PHOTO**