



LIADO: LE ITALIAN-AMERICAN WOMEN OF TODAY

MEMBERSHIP APPLICATION

Date: _____

Renewal: YES OR NO _____

First Name: _____

Surname: _____

Husband's name: _____

Address: _____

City/State/Zip Code: _____

Home Phone: _____

Cell Number: _____

Business Number: _____

Email: _____

Occupation: _____

Date of Birth: _____

Your Place of Birth: _____

Parents Town: _____

Grand or Great Grand
Parents Town: _____

Family Name: _____

LIADO
P.O. Box 1767
New Port Richey, FL 34656

Email: liadosisters@gmail.com

Please circle the committee(s)
you would like to participate in:

Membership

Public Relations

Cultural Programs

Hospitality

Scholarship

Social Events

Fundraising

****INTERNAL USE ONLY**
DO NOT COMPLETE**

LIADO Payment Method

Cash:

Check:

Square:

Annual dues are \$40.00, payable to LIADO by March 1st of each year. Dues for new memberships which begin January, February or March will be paid through April of the following year.