

**ST. PIUS X MEN'S CLUB
MEMBERSHIP FORM
(2011 Version)**

PLEASE PRINT

NAME **LAST** _____ **FIRST** _____ **MIDDLE** _____

ADDRESS **NO.** _____ **STREET** _____ **APT OR BOX** _____

CITY _____ **STATE** _____ **ZIP** _____

HOME PHONE _____ **ALTERNATE PHONE** _____

***EMAIL ADDRESS** _____

***WIFE'S NAME** _____ ***EMPLOYER** _____

SKILLS / EXPERIENCE _____

*** Indicates Optional**

DATE JOINED MEN'S CLUB **MONTH** _____ **YEAR** _____

I HEREBY CERTIFY THAT I AM A CATHOLIC, AND THAT I OR MY FAMILY IS REGISTERED WITH ST. PIUS X CATHOLIC CHURCH IN CORPUS CHRISTI, TEXAS.

SIGNATURE

DATE