



Enyimba Social Club USA, Inc.

MEMBERSHIP APPLICATION

APPLICANT INFORMATION			
Name:			
Current address:			
City:	State:	ZIP Code:	
Phone:	Place of Birth:	Sex: Female Male	
Date of Birth:	DL#	State	
EMPLOYMENT INFORMATION			
Current employer:			
Employer address:		Position:	
Phone:	E-mail:	Fax:	
City:	State:	ZIP Code:	
COUNTRY OF DOMICILE:			
HOW LONG DID YOU LIVE THERE?			
TOWN AND STATE OF ORIGIN:			
NIGERIAN ADDRESS:			
EMER	RGENCY CONTACT		
Name of a relative not residing with you:			
Address:		Phone:	
City:	State:	ZIP Code:	
Relationship:			
SPOUSE INFORMATION IF JOINT MEMBERSHIP			
Name:			
Date of birth:	Phone:		
SPOUSE EMPLOYMENT INFORMATION			
Current employer:			
Employer address:			
Phone:	E-mail:		
City:	State:	ZIP Code:	
S	PONSORS (1)		





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Name:		
Address:		
Phone:		
SPONSORS (2)		
Name:		
Address:		
Phone:		
REFERENCES		
Name:		
Address:		
Phone:		
Name:		
Address:		
Phone:		
Besides traffic violation, have you ever been convicted? Yes No		
If yes state the offense, place and year of conviction:		
Why are you seeking membership in this club?		





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State any union, Social club, or Organization in which you are a member	·	
If admitted, will you abide by the ethics and code of the club? Yes In what ways do you think you can contribute to the growth and develop		
Titles, national honors, decorations, etc:		
What are your hobbies?		
I have read and understood fully the above information. I under information given by me will lead to an automatic rejection of my ap Membership.	stand that any misleading or false oplication or cancellation of my	
SIGNATURES		
Application fee varies by club.		
Signature of applicant:	Date:	
Signature of spouse (only if for a joint membership):	Date:	
Note: It is your responsibility to inform the Club in writing if you ca are invited for an interview. If you miss two consecutive meetings v	• • • • • • • • • • • • • • • • • • • •	

application will be withdrawn, and you will be required to reapply for membership.