



# APPLICATION FOR MEMBERSHIP

## ANCIENT ORDER OF HIBERNIANS IN AMERICA, INC.

### Port Richmond Division # 87



**TO BE A MEMBER YOU MUST BE A PRACTICING ROMAN CATHOLIC AND BE OF IRISH HERITAGE BY BIRTH OR DESCENT.** (Only Exception: Clergy need not be Irish.)

I hereby apply for admission into the Ancient Order of Hibernians in America, Inc., and agree that my reception and continuance in said order shall depend upon the truthfulness of my answers to the questions which are hereto attached, which answers are made by me for the purpose of obtaining admission to the Order.

-----PLEASE TYPE OR PRINT CLEARLY-----

Name \_\_\_\_\_ Occupation \_\_\_\_\_

Age \_\_\_\_\_ Born on \_\_\_\_\_  
(Day) (Month) (Year)

What was your mother's maiden name? \_\_\_\_\_ Are you a Roman Catholic? \_\_\_\_\_

Have you complied with your religious duties within the past twelve months? \_\_\_\_\_

Do you belong to any Society to which the Catholic Church is opposed? \_\_\_\_\_

Name of your parish church is \_\_\_\_\_

Residence \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ - \_\_\_\_\_

Business Address \_\_\_\_\_

Contact Information: Home: \_\_\_\_\_ Business: \_\_\_\_\_

Cell: \_\_\_\_\_ email: \_\_\_\_\_

Are you Irish either by: Birth \_\_\_\_\_ OR Descent \_\_\_\_\_ (Check Which)

Were you ever a member of the Ancient Order of Hibernians, Inc. and if so, in what city or town and state? Yes \_\_\_\_\_ No \_\_\_\_\_

What was the number of your Division? \_\_\_\_\_

What was the cause of your withdrawal? \_\_\_\_\_

I do solemnly pledge my sacred word and honor that the answers I have given to the above questions are true.

\_\_\_\_\_  
(Applicant Signature)

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

**MEMBERSHIP NUMBER**

**PROPOSER'S CERTIFICATE**

*I hereby certify on my honor as a member of the Ancient Order of Hibernians that I am acquainted with the above applicant. I know him to be a practicing Catholic, and one worthy in every way to become a member of this Order*

Proposal's Signature \_\_\_\_\_

Address \_\_\_\_\_

**DIVISION PRESIDENT'S CERTIFICATE**

*I hereby certify that this application has been read by me at a regular meeting and that the applicant has been elected by the membership of this Division on this*

\_\_\_\_\_ Day of \_\_\_\_\_, 20 \_\_\_\_\_

Signed \_\_\_\_\_  
President

**REPORT ON APPLICATION**

*Your Committee, to whom was referred the application of*

\_\_\_\_\_

*Would respectfully report that we have investigated the qualifications of said applicant for membership in the Ancient Order of Hibernians, Inc., and recommend approval of this application.*

Committee Members: \_\_\_\_\_

\_\_\_\_\_

**FINANCIAL SECRETARY'S CERTIFICATE**

*I hereby certify that the initiation fee of \$ \_\_\_\_\_*

*Has been paid on the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_*

Signed \_\_\_\_\_  
Financial Secretary