

***FILITALIA INTERNATIONAL***

**1809-13 Oregon Avenue Philadelphia, PA 19145 (215) 334-8882**

**Web:** [**www.FilitaliaInternational.com**](http://www.FilitaliaInternational.com)

**Email:** [**info@FilitaliaInternational.com**](mailto:info@FilitaliaInternational.com)

**Domanda d’iscrizione (Membership Application)**

Cognome e Nome: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Name)*

Nome dei figli sopra i 18 anni non sposati che abitano in casa: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Name of children over 18, not married and living at home)*

Luogo di nascita: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Data di nascita: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Place of birth)* *(Date of birth)*

Indirizzo di residenza: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Address)*

Citta`: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Stato: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(City) (State) (Zip)*

Numero telefonico (Residenza): \_\_\_\_\_\_\_\_\_\_\_\_\_ Lavoro: \_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Telephone number - Home) (Work) (E-mail)*

Occupazione: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Titolo di studio (facoltativo): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Occupation) (Degree)*

L’applicante dichiara che le informazioni fornite sopra corrispondono alla verita` ed accetta i regolamenti previsti nello statuto di Filitalia National. *(The applicant states that the above information is true and agrees to follow the by-laws of Filitalia National)*

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

Applicazione compilata in data Firma dell’applicante Firma del patrocinatore

*(Date of Application) (Signature)* *(Sponsor signature)*

Scegliere un capitolo (Select a chapter)

USA: Abington, PA ITALY: Campobasso, Italy

Bucks County, PA Campobasso-Sannio, Italy

Montgomery County, PA Como, Italy

Northeast Philadelphia, PA Cosenza, Italy

South Philadelphia, PA Cremona, Italy

South East Philadelphia (COSMI), PA Lodi, Italy

South West Philadelphia (CRI), PA Mantova, Italy

Camden County, NJ Milan, Italy

Gloucester County, NJ Rome, Italy

Delco County, PA Siena-Toscana, Italy

Wilmington, DE Venezia, Italy

Fannin, GA

GERMANY: Kaiserslautern, Germany

BRAZIL: Sao Paolo

Annual Membership Fee:  $25.00 per single membership  $40 per family membership

Tassa annuale  E 25.00 per persona  E 40 per famiglia