

American Sokol Los Angeles 214 Main Street #215 El Segundo, CA 90245

2024 MEMBERSHIP APPLICATION

SOKOL UNIT _	Los Angeles	
Date:	_	
Title: Mr	Mrs Ms	
Name:		
Address:		
City:	State:	Postal Code (Zip+4):
Email:		_Telephone:
Birth Date/or B	irth Year:	Male Female
Publication Con	nmunication Preference: I	Mail Email
U.S. Citizen or l	egal resident of USA? Yes _	No
		to be governed by the Bylaws of the American my activities on their behalf.
	Applicant's Signatu	ire:
	Sponsor's Signatur	e:
(Applicant ple	ase complete personal in	formation on reverse)
Date Installed a	s Member:	For Office Us
Member Type: \	Voting Non-Voting	;

Revised December 2023

Date entered on National Database:
City, State, Country of birth
Occupation
Married Single Widowed
Name of Spouse
Children in your household (Names/Ages)
List other clubs, organizations to which you belong
Are you of Czech/Slovak heritage? Yes No How did you hear about Sokol?
Are you or your children currently enrolled in our programs? Yes No
Explain
Sokol Los Angeles Dues and Fees to be submitted with Membership Application:
2024 Annual Membership Renewal Dues \$45.00 2024 New Member Dues \$50 (new member pays one-time application fee of \$5.00)

Sokol Los Angeles is a 501(c)3 organization. Donations are tax deductible.