

Portuguese American Association of Falmouth

55 Ashumet Rd., East Falmouth, MA 02536, 508-563-7396, WWW.PAAFalmouth.com

Mailing Address: P.O. Box 70, Falmouth, MA 02541



Membership Application

I, (we) request for consideration for membership. The objective of this organization is to initiate, encourage, sponsor and promote Portuguese cultural activities. Further, to instill among members a pride of heritage, encourage the study of Portuguese history, language, arts and sciences and to promote among members of the Portuguese-American Association a genuine feeling of warmth and good fellowship.

Membership can be available to any person of good moral character who manifests a genuine interest in the purposes of this organization, who is recommended by the Board of Directors and is subsequently voted in the affirmative by at least two-thirds (2/3) of the members present.

I request Single Membership at an annual cost of \$40.00. This amount is to be paid with this completed and signed application

I request Family Membership at an annual cost of \$60.00. This amount is to be paid with this completed and signed application

Signature(s) _____

Print Name(s) _____

Residential Address _____

Mailing Address _____

Email Address(s) _____

Cell Phone(s) _____ Other Phone _____

Employer _____ Occupation _____

Sponsor _____ Date _____

By checking this box I consent to receive email notifications from the Portuguese American Association.