## FRIENDLY SONS OF ST. PRIKICK

OF CENTRAL IOWA



## **APPLICATION FOR MEMBERSHIP**

Sir, your name has been submitted to this organization for consideration for membership.

Basic requirements for membership are as follows:

- 1) You must be male and have reached the age of 21.
- 2) You must be able to trace your lineage to Ireland.

Having fulfilled these requirements, please complete this application.

NAME OUD JON WINKLE
ADDRESS HARN East OVIDAVE.
CITY Des MoiNes, ID. ZIP 50317
TELEPHONE (515) 364-1507 cell-(515) 865-03360
OCCUPATION POSITION A
BUSINESS ADDRESS HOTLINE FREIGHT PHONE (608)451-0/24
DATE OF BIRTH 10- 2-61 PLACE OF BIRTH Water City, To.
EMAIL Chinkles & a yahoo com
Ancestry
(Give a sentence or two of what you know of your parents' lineage to Ireland, if you know it)
grandmothers moder Namo Was / McCillagh!
ath market
Applicant's Signature
4-11-16 Mile Commel
Date Member's Signature