

APPLICATION FOR MEMBERSHIP



Luxembourg Brotherhood of America

The Fraternal Order of Luxembourgers of the United States

Section 3 Section 8 Section 15		
	APPLYING TO SECTION #	
Na	Name:	
Ac	ldress:	
Ci	ty: State: ZIP:	
Er	nail:	
Ph	one: Sponsor's Name (<u>if any)</u> :	
	PLEASE ANSWER THE FOLLOWING QUESTIONS:	
1.	Have you ever held membership in the LBA prior to now?	
2.	Are you of Luxembourg heritage? (<u>Luxembourg Heritage is not required</u>)	
3.	Are there any special Skills or Resources you would like to contribute in a volunteer	
	capacity for the L.B.A.?	
4.	Would you like to be included on our L.B.A. Event Email Distribution?	
5.	How did you hear about the L.B.A.?	
	Applicant must be 18 years or older to join the L.B.A.	
	If the applicant is younger than 18 years old, we require the applicant's Date of Birth and a	
	Parent / Guardian's signature for the applicant to become an 'Auxiliary' Member.	
I hereby apply for membership in the Luxembourg Brotherhood of America and agree to comply		
with all the By-Laws of both the Brotherhood and Section. L.B.A. By-Laws can be found on our		
W	ebsite under the 'Section Pages' tab. https://www.luxbrotherhood.org/section-pages/	
Si	gnature: Date:	