



1023 W Fulton Market, Chicago, IL 60607 Phone 312-733-9533 office@showmensleague.org

Application for Membership

Mr. Mrs. Ms.: _____ hereby applies for membership in the Showmen's League of America, sponsored by the undersigned, a member in good standing.

(Sponsor) _____ (Date)

Please provide the following information:

Full Name: _____ Date of Birth: _____

Home Address _____

Street City State Zip

Home Phone: _____ Cell: _____

Email Address: _____

Business Name, Address, Phone, if different: _____

Current affiliation with the industry: _____

Prior/other affiliations: _____

Country of Citizenship: _____

\$10,000 AD&D Insurance Policy Information:

Beneficiary Name _____ Relationship _____ % _____

Beneficiary Name _____ Relationship _____ % _____

(Beneficiaries must equal 100% when totaled)

Home/Cell Phone: _____

Home Address _____

Street City State Zip

I hereby promise that if elected to membership in the Showmen's League of America (the League) I shall support the Constitution and By-Laws of the League as they now exist and as they may hereafter be changed or amended; that I assume all the obligations and responsibilities of membership in the League that do not conflict with my duties to self, family, religious beliefs and political beliefs and that I shall conduct myself at all times so that no discredit will be brought on the League. I further state that all statements and representations made by me on this application are true and correct to the best of my knowledge.

Signature of Applicant _____ *Date*

Receipt for: _____ Dues (\$35.00 1 year) Paid By: _____ Cash
_____ Dues (\$120 4 years) _____ Check to "SLA"
_____ Initiation Fee (\$35.00)

Received by: _____ Amt Recvd _____ Date: _____

Signature of Sponsor _____ *Date*