



Annual membership dates are  
September 1 through August 31

1023 W Fulton Market, Chicago, IL 60607 Phone 312-733-9533 [office@showmensleague.org](mailto: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