



The Italian Club of Tampa, Inc.  
Italian Club Building & Cultural Trust Fund  
1731 E. Seventh Avenue, Tampa, FL 33605  
Phone: (813) 248-3316  
www.italian-club.org

Date of Application: \_\_\_\_\_

## Italian Club Membership Application (Please Print)

Check your preferred level of membership; all memberships are processed annually; and are nonrefundable

- Individual \$200** Provides membership for a single individual
- Family \$250** Provides membership for parents and dependent children
- DaVinci \$550** Provides for a business level membership; which will also include parents and dependent children; this membership level is tax deductible

*All Memberships include an allocation towards our organizations **Building Preservation Reserve Fund** - a long-term initiative that funds our building preservation and revitalization. The purpose of this account is to set aside moneys that the board has identified for use to defray the future costs related to repair or replacement of, or additions to, the major components that the organization is obligated to maintain. This is vital to the long-term preservation of our historic building, which is the home of our membership, and the backbone of our mission. The goal is to ensure that both our building and organization are here for future generations.*

**Primary Card Member's Name:** \_\_\_\_\_  
(First, Middle Initial, Last, Suffix)

Business Name (for Davinci Memberships only): \_\_\_\_\_

Preferred Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**\*\*for Family and Davinci Memberships only, please list the name of the spouse and dependent children living in the household\*\***

Spouse Name: \_\_\_\_\_ Email: \_\_\_\_\_

Child: \_\_\_\_\_ Child: \_\_\_\_\_

Child: \_\_\_\_\_ Child: \_\_\_\_\_

Primary Member Employer /Occupation \_\_\_\_\_

Spouse Employer /Occupation: \_\_\_\_\_

**If you know a current Member, please list them as a sponsor (not required):** \_\_\_\_\_

*if you do not have a sponsor you may leave this line blank and a membership committee member will be your sponsor.*

I would like to assist the Club by serving on the following committees:

\_\_\_\_\_ Building                      \_\_\_\_\_ Food Prep                      \_\_\_\_\_ Grants                      \_\_\_\_\_ Membership  
\_\_\_\_\_ Social                              \_\_\_\_\_ Cemetery                      \_\_\_\_\_ Governance                      \_\_\_\_\_ Cultural  
\_\_\_\_\_ Fundraising                      \_\_\_\_\_ Website                      \_\_\_\_\_ Ladies Auxiliary\*\*                      \_\_\_\_\_ Krewe Of Italia\*\*  
Other: \_\_\_\_\_

**\*\*Please Note: additional fees/ dues apply for both our Krewe of Italia and our Italian Club Ladies Auxiliary Program**