

## German Ladies' General Benevolent Society

Helping women and children of German descent in the Bay Area since 1870.

| Name:   | Date:  |
|---|--------|
| Address:  |        |
| City, Zip   | Phone: |
| Email:  |        |
| German Origin (briefly describe):   |        |
| I hereby apply for membership in the German Ladies' General Benevolent Society. I understand that the Society is a charitable organization and I agree to abide by the by-laws. I have submitted my membership fee of \$50 for the current year with this application.  Signature of applicant: |        |
|   |        |
| Sponsored by (two members in good standing):  |        |
| 1. 2.   |        |
| Email the completed form to info@germanladiesbenevolentsociety.org or by mail to PO Box 27101, San Francisco, CA 94127  |        |
| For office use only. Action taken at Board of Directors meeting:  |        |
| □ Accepted Date of Acceptance   |        |
| Comments:   |        |
| ☐ Denied Reason for Denial  |        |
| Signature of President  |        |
| Name  |        |