SONS OF ERIN CAPE COD, INC.
General Membership Renewal
All Sections Must Be Completed

Name: _____Member #_____ Date of Birth_____

Cape Address: _____

Cell Phone: _____ Cape Phone: _____

Off Cape Address (if applicable): _____

Off Cape Phone_____

Email:_____

All member categories	**$100.00 as of July 1, 2026**
Lifetime Membership	$1000 (may be paid in full or in 4 equal quarterly payments of $250.00)

As of July 1st 2026 - * If payment is received after August 1st, a $25.00 late fee will be imposed. After September 1st, members will be required to rejoin and pay the new membership application fee of $200.00

Pay by cash or check - Please make check payable to **Sons of Erin Cape Cod**

Drop off at the Club or mail to: Sons of Erin Cape Cod
P.O. Box 403
South Yarmouth, MA 02664

Community Fund Contribution: $ _____

Please list below any committees, such as Building, Parade, Kitchen, Events, or Membership, that you may be interested in joining or any special skills that you would like to volunteer to the club.

****** **Membership renewals due by July 31st** ******
*** Please note that membership dues/donations **are not** tax-deductible ***

Date Application Received: _____

Payment ☐ Cash ☐ Check