

# AMERICAN TURNERS – COVINGTON, INC.

447 PIKE STREET  
COVINGTON, KY 41011

## APPLICATION FOR MEMBERSHIP

NAME: (Please Print) \_\_\_\_\_

Spouse's Name: (Please Print) \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
STREET CITY STATE ZIP

TELEPHONE: \_\_\_\_\_  
HOME Work Cell

E-mail Address: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ MARITAL STATUS \_\_\_\_\_

NAMES AND AGES OF CHILDREN \_\_\_\_\_,  
\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_,

- This application must be signed (sponsored) by two members in good standing of the Covington Turner Society.
- An initiation fee of \$25.00 plus the yearly membership must be submitted upon application. All memberships are \$100.00 yearly. Since the dues are prorated throughout the year, once you are sworn in you will be refunded the difference. (If the application is denied, you will receive a full refund).
- **This application does not guarantee children's eligibility for playing sports. Availability on teams will be decided yearly and spots are determined by seniority of the card member.**
- Have you been a previous Turner's Member? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes: Location \_\_\_\_\_ Last year of Membership \_\_\_\_\_

\_\_\_\_\_  
NAME OF SPONSOR (PLEASE PRINT)

\_\_\_\_\_  
SIGNATURE OF SPONSOR

\_\_\_\_\_  
NAME OF SPONSOR (PLEASE PRINT)

\_\_\_\_\_  
SIGNATURE OF SPONSOR

I hereby apply for membership in the Covington Turners Society, Inc., and promise to strictly observe the general principles and statutes of the American Turners, as well as the statutes of the Central States District, and those of the above society.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE