

POLISH AMERICAN CONGRESS - ILLINOIS DIVISION

ORGANIZATIONAL MEMBERSHIP APPLICATION

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PLEASE TYPE OR PRINT	Please return th	Please return this application to:						
CLEARLY		POLISH AMERICAN CONGRESS – ILLINOIS DIVISION		Phone: 312-521-0178				
(All fields are required.)		6021 W. Belmont Ave. Chicago, IL 60634		Email: contact@pacillinois.org				
Name of the Organization		Date						
President's Name: Mr, Mrs, Ms, Miss, Dr (circle one)								
Last Name	Middle Initial							
President's Address (Nr., Street, City, State, Zip Code)								
President's Home Phone	President's Business Phone							
President's Email	President's U.S. Residency Status (check as applicable)							
		☐ Citizen	tizen 🗆 By Birth 🗆 By Naturalization 🗖 Permanent Resident					
Year Organization Established	Organization	Current Number of Groups (Chapters) in Organization						
When are elections held?		How long is the term of the office?						
When are meetings held?	Where are the meetings held?							
	Street address	reet address City, State & ZIP						
Number of authorized delegates to the PAC-IL								
Dues payment enclosed: \$								
Organization's President or_Secretary Signature								
Date								
By applying for membership in PAC IL you, and all your delegates, agree to receive paper and electronic communication.								
Office Use Only:								
The PAC IL Division recommends / does not recommend this organization and its delegates for membership in the PAC								
Signature	Signature Position			Date				
The PAC National Executive Committee recommends / does not accept this organization and its delegates for membership in the PAC								
Signature		Date						



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NAMES, ADDRESSES AND RESIDENCY ATTESTATION OF THE DELEGATES FROM THIS ORGANIZATION TO THE POLISH AMERICAN CONGRESS

1 Last Name		First Name		Middle Initial			
Address (Nr., Street, City, State, Zip Code)							
U.S. Residency Status (must check one):		☐ Citizen	☐ Permanent Resident				
Home/Mobile Phone	Business Phone	Email Address					
2 Last Name		First Name		Middle Initial			
Address (Nr., Street, City, State, Zip Code)							
U.S. Residency Status (must check one):		☐ Citizen	☐ Permanent Resident				
Home/Mobile Phone	Business Phone	Email Address					
3 Last Name Middle Initial							
		First Name		Wildule Illitial			
Address (Nr., Street, City, State, Zip Code)							
U.S. Residency Status (must check one):		☐ Citizen	☐ Permanent Resident				
Home/Mobile Phone	Business Phone	Email Address					
4 Last Name		First Name		Middle Initial			
Address (Nr., Street, City, State, Zip Code)							
U.S. Residency Status (must check one):		☐ Citizen	☐ Permanent Resident				
Home/Mobile Phone	Business Phone	Email Address					
5 Last Name		First Name		Middle Initial			
Address (Nr., Street, City, State, Zip Code)							
U.S. Residency Status (must check one):		☐ Citizen	☐ Permanent Resident				
Home/Mobile Phone	Business Phone	Email Address					