ITALIAN CATHOLIC FEDERATION

8393 Capwell Drive, Suite 110 Oakland, CA 94621

MEMBERSHIP APPLICATION AND DATA FORM

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Address: City ST E-mail Address: Area Code Number Telephone: Application Are you a baptized Roman Catholic? What parish do you belong to? Name of If not Catholic, is your spouse a baptized Roman Catholic the I.C.F.?										oplicati YES	on Spon	NO		Far Cha Cai Tra Tra Cai Ap Da No Die	lividual Membange Addressed ed on:/_ te:/	ership ess/Nam Hospital # Br.# of Memb spital Pl _ / Age:	ne/Ph. Plan pership an:
	Signature of Applicant/Member Signature of Spouse												Branch #36 Secretary				