



Ancient Order of Hibernians in America
 Pvt. Barney Devine Division 1
 Adams County
 Gettysburg, Pennsylvania

Return completed application by email or post to:

webmaster@gettysburgaoh.com

Ancient Order of Hibernians - PO Box 3492 - Gettysburg, PA 17325

I apply for admission into the Ancient Order of Hibernians and agree that my reception and continuance in said Order shall depend upon the truthfulness of my answers to the questions below.

PLEASE TYPE OR PRINT CLEARLY

NAME _____ OCCUPATION _____
 BIRTHDATE _____ PRESENT AGE _____
 STREET ADDRESS _____
 CITY _____ STATE _____ ZIP CODE _____ - _____
 TELEPHONE NUMBER _____ - _____ - _____ E-MAIL _____

ARE YOU A ROMAN CATHOLIC? _____
 HAVE YOU COMPLIED WITH YOUR RELIGIOUS DUTIES WITHIN THE PAST 12 MONTHS? _____
 DO YOU BELONG TO ANY SOCIETY TO WHICH THE CATHOLIC CHURCH IS OPPOSED? _____
 ARE YOU IRISH BY BIRTH ___ OR DESCENT? ___ (CHECK ONE)

PARISH _____ PASTOR _____
 ADDRESS _____ PHONE # _____
 CITY _____ STATE _____ ZIP CODE _____

Were you ever a member of the Ancient Order of Hibernians and if so, where? _____
 Why did you leave? _____

I do solemnly pledge my sacred word and honor that the answers I have given to the above questions are true.

Applicant's Signature _____ Date _____

===== THIS SECTION FOR INTERNAL USE ONLY =====

SPONSOR'S NAME: _____
 COMMITTEE REPORT: _____
 FIRST READING DATE _____ SECOND READING _____ ELECTION _____

PRESIDENT'S CERTIFICATE: I hereby certify that this application has been read by me before the membership on dates noted above and that the applicant has been elected by the membership of this division on _____, PRESIDENT.

I certify that dues in the amount of _____ has been paid to me on _____ DIV. MEMBERSHIP # _____, FINANCIAL SECRETARY.