



**THE FRATERNAL ORDER OF *Eagles***  
*-Philippine Eagles, Inc.*  
First Philippine Born Fraternal Socio - Civic Organization  
*Service Through Strong Brotherhood*



**Magiting MAPAGMAHAL *Eagles* CLUB**  
**MEMBERSHIP APPLICATION**

| PERSONAL INFORMATION:                        |            |          |               |           |                            |                |                       |                          |          |
|--|------------|----------|---------------|-----------|----------------------------|----------------|-----------------------|--------------------------|----------|
| NAME   |            |          |               |           |                            |                |                       |                          |          |
|  | FIRST NAME |          | NICKNAME      |           | MIDDLE                     |                | LAST NAME             |                          |          |
| PLACE OF BIRTH                               |            |          |               |           | CIVIL STATUS               |                |                       |                          |          |
| DATE OF BIRTH                                |            |          |               |           | <input type="checkbox"/>   | SINGLE         |                       | <input type="checkbox"/> | MARRIED  |
| HEIGHT                                       |            | WEIGHT   |               |           | <input type="checkbox"/>   | SEPARATED      |                       | <input type="checkbox"/> | WIDOW/ER |
| CITIZENSHIP                                  |            | RELIGION |               |           |                            | BLOOD TYPE     |                       |                          |          |
| ADDRESS                                      |            |          |               |           |                            |                |                       |                          |          |
|  | STREET NO. |          | BARANGAY      |           | MUNICIPALITY/CITY          |                | PROVINCE              |                          | ZIP CODE |
| TELEPHONE NO.                                |            |          | CELLPHONE NO. |           |                            |                | EMAIL                 |                          |          |
| EMPLOYMENT / PROFESSION: IT Specialist       |            |          |               |           |                            |                |                       |                          |          |
| NAME OF OFFICE<br>LINE OF BUSINESS           |            |          |               |           | ADDRESS                    |                |                       |                          |          |
| TITLE AND POSITION                           |            |          |               |           | TEL. NO.                   |                | FAX NO.               |                          |          |
| LIST OF LEGAL DEPENDENTS:                    |            |          |               |           |                            |                |                       |                          |          |
| NAME   |            |          |               |           | DATE OF BIRTH              |                |                       | AGE                      |          |
| SPOUSE NAME                                  |            |          |               |           |                            |                |                       |                          |          |
| NAME<br>OF<br>CHILDREN                       | 1.         |          |               |           |                            |                |                       |                          |          |
|  | 2.         |          |               |           |                            |                |                       |                          |          |
|  | 3.         |          |               |           |                            |                |                       |                          |          |
|  | 4.         |          |               |           |                            |                |                       |                          |          |
|  | 5.         |          |               |           |                            |                |                       |                          |          |
|  | 6.         |          |               |           |                            |                |                       |                          |          |
| EDUCATIONAL ATTAINMENT:                      |            |          |               |           |                            |                |                       |                          |          |
| ELEMENTARY                                   |            |          |               |           |                            | DATE GRADUATED |                       |                          |          |
| HIGH SCHOOL                                  |            |          |               |           |                            | DATE GRADUATED |                       |                          |          |
| COLLEGE                                      |            |          |               |           |                            | DATE GRADUATED |                       |                          |          |
| COURSE                                       |            |          |               |           |                            |                |                       |                          |          |
| HOBBIES                                      |            |          |               |           |                            |                |                       |                          |          |
| SPECIAL SKILLS                               |            |          |               |           |                            |                |                       |                          |          |
| SPONSOR: (Regular/Active Member of the Club) |            |          |               |           |                            |                |                       |                          |          |
| NAME   |            | DATE     |               | SIGNATURE |                            |                |                       |                          |          |
| <i>Eagles</i>                                |            |          |               |           |                            |                | APPLICANT'S SIGNATURE |                          |          |
|  |            |          |               |           |                            |                |                       |                          |          |
| ENDORSED BY:                                 |            |          |               |           |                            |                |                       |                          |          |
| <i>Eagle</i>                                 |            |          |               |           | <i>Eagle</i>               |                |                       |                          |          |
| CHAIRMAN MEMBERSHIP COMMITTEE                |            |          |               |           | CHARTERED PRESIDENT (EY: ) |                |                       |                          |          |
| CONCURRED BY:                                |            |          |               |           | APPROVED BY:               |                |                       |                          |          |
| <i>Eagle</i>                                 |            |          |               |           | <i>Eagle</i>               |                |                       |                          |          |
| NATIONAL PEIL DIRECTOR (EY: )                |            |          |               |           | NATIONAL PRESIDENT (EY: )  |                |                       |                          |          |