



SIR VISITOR REGISTRATION

**SIR's Mission is to improve the lives of our members through
fun activities, luncheons and events while Making Friends for Life**

If You Print This File and Then Fill It With Pen, Please Print the Following Information Clearly

First Name	Initial	Last Name	Nickname	Partner's Name

Home Address (Street #, Apt.)	City, State	Zip Code
Mailing Address (If Different)	City, State	Zip Code
Area Code - Phone Number	E- Mail Address	Birth Date

How did you hear about SIR? _____

I am a guest of: _____ (if applicable)

I understand and agree that a representative of SIRs may contact me and/or send information via email.

Signature: _____

Date: _____