

# Bacio Membership Application - \$60 per year

Please print and fill out the application below. Make your check payable to BACIO and mail to:

BACIO  
19 Old Sport Hill Rd.  
Easton, CT 06612

Family Name \_\_\_\_\_

Individual Family Members  
(Please list all and their ages)

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Street \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_

Business Phone \_\_\_\_\_

Fax \_\_\_\_\_

What kind of work do you do?  
(or what did you do before retirement?)

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If you are Italian, what town/province does your family originate?

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What kind of programming would you like to see BACIO conduct?

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Thank You!