

**SOCIETÀ ITALIANA DI MUTUA BENEFICENZA CEFALUTANA**  
ORGANIZZATA, 19 GIUGNO, 1887 INCORPORATA, 10 AGOSTO, 1887  
P. O. Box 6634  
Metairie, LA 70009

Webpage: <http://cefalusociety.com>

**David Matassa, il Presidente**

Email: [dfmatassa@gmail.com](mailto:dfmatassa@gmail.com); Phone: #225-715-4197



## **2024 DUES RENEWAL – \$60.00 per member**

MEMBER NAME(S):

\_\_\_\_\_  
(Last) (First) (Middle or Maiden Name)

\_\_\_\_\_  
(Last) (First) (Middle or Maiden Name)

Address (Please print)

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Date of Birth (optional) \_\_\_\_\_

Phone # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Date of Birth (optional) \_\_\_\_\_

E-Mail (Please print) \_\_\_\_\_ Fax # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Please remit your dues of \$60.00 per member payable to Cefalutana Society.**

Name(s) of children under 18 years of age and their dates of birth (continue on back if needed):

(1) \_\_\_\_\_ (3) \_\_\_\_\_

(2) \_\_\_\_\_ (4) \_\_\_\_\_

**Please remit \$40.00 dues for each child between the ages of 13 and 18, and/or \$20.00 dues for each child 12 years of age and under.**

Please make checks payable to **Cefalutana Society** and mail to:

Cefalutana Society  
c/o Lisa Serio  
P. O. Box 6634  
Metairie, LA 70009