

Twin Cities Swiss American Association 3513 Federal Dr. #201 Eagan, MN 55122 (651) 696-0094

New/Existing Member Application (June 2024 – May 2025)

First Name	Last Name
Spouse/Significant Other's First Name	Spouse/Significant Other's Last Name (if different)
Address	Apt #
Tradices Tradices	
City	State 7ID Code
City	State ZIP Code
Telephone	Email Address
Alternate Telephone	Alternate Email Address
Children under 18:	
Child's First Name	Year of Birth Child's First Name Year of Birth
Child's First Name	Year of Birth Child's First Name Year of Birth
Type of Membership	Member since
	/
Family \$ 20.00	
Single/Seniors \$ 15.00	
Descendants of members quali	y for a complimentary first year membership
Descendants of members quan	y tot a complimentary more year membersing
	
Date	Signature
Please forward this form alo	ng with a check to TCSAA, 1861 Princeton Ave, St. Paul, MN 55105
	or email to mgaelli@gmail.com

Internal: \square MG \rightarrow \square MH \square ML \square EDL Date: ______ Init: ___