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TORSKE KLUBBEN  
NORWEGIAN LUNCHEON CLUB  
MADISON • WISCONSIN

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Dear Prospective Member,

Madison Torske Klubben celebrates the spirit of our Norwegian forefathers—the spirit of camaraderie among Norwegian men of good will, the eating of boiled fresh codfish and having fun together. Our meetings are held monthly at the Madison Club from September through April on Saturday afternoons, attempting to avoid Badger football home games and other major events. Toasts of Norwegian Aquavit are interspersed with lefse, codfish, boiled potatoes and flatbread. An informative program with wide ranging topics is presided over by one of our members acting as toastmaster for the day.

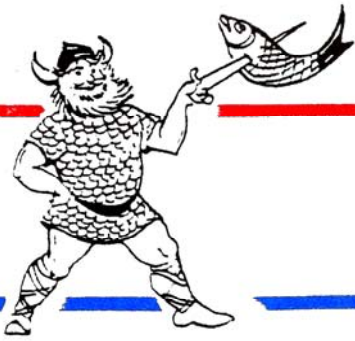
Dues are currently \$235/ year which includes \$185 for club membership and all eight luncheons plus two free guest luncheons at The Madison Club, and a tax deductible contribution to The Madison Torske Klubben Foundation of \$50. If you are unable to attend regularly you may pay for club membership (\$60/year) and donation to the Foundation (\$50/year), and pay for each individual luncheons (\$25).

At each meeting, one or more male guests may be invited except for February when the Ladies are our guests.

Membership applications will be acted upon their return to Steve Fortney, 501 W South St, Stoughton, WI 53589.

Steve Fortney  
Boss

0214



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**CURRICULUM VITAE**

Name: \_\_\_\_\_

Wife's Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Home phone: \_\_\_\_\_ Email address: \_\_\_\_\_

Present occupation: \_\_\_\_\_

Business phone: \_\_\_\_\_

Education: \_\_\_\_\_

Military history: \_\_\_\_\_

Past occupations: \_\_\_\_\_

Children: \_\_\_\_\_

Organization memberships: \_\_\_\_\_

Place of birth: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Father's nationality: \_\_\_\_\_ Mother's nationality: \_\_\_\_\_

Special awards: \_\_\_\_\_

Hobbies: \_\_\_\_\_

Please add other interesting facts about yourself on the back of this page, or by addendum.

Please return to: Steve Fortney  
501 W South St  
Stoughton WI 53589



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APPLICATION FOR MEMBERSHIP

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

I hereby apply for membership in the Madison Torske Klubben and agree to the membership rules and dues.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Sponsor: \_\_\_\_\_

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Do not fill in below this line

Date presented to the board: \_\_\_\_\_

Supplementary data: \_\_\_\_\_

Action: \_\_\_\_\_

Date received by club: \_\_\_\_\_

Board Signature: \_\_\_\_\_