

Confrérie des Chevaliers du Tastevin
Commanderie d'Amérique

PROPOSAL FOR MEMBERSHIP
(Ex. 1B - PM)

PLEASE NOTE: THIS FORM IS COMPUTER-WRITABLE
THANK YOU FOR TYPING TO ENSURE LEGIBILITY AND ACCURACY OF YOUR RECORDS

SOUS-COMMANDERIE: _____

Name of Candidate: Michael J. Pucillo Nickname: _____
(As it will appear on your scroll) (Please indicate Monsieur/Madame if first name is non-gender-specific)

Birthdate: 9/15/1953
Mo/Day/and Year (Please)

Occupation: Lawyer Spouse's Name: Deborah Nickname: _____
(retired) Spouse's Tastevin Title (if applicable): _____

Addresses: **Please include CITY, STATE and ZIP CODE (Please)**
(Please Check Preferred):

☒ Residence: 615 Dewey Hill Rd. Stowe Vt 05672

☐ Business (include Firm name): _____

Seasonal: (From: May to Oct) (In Palm Beach Fl. Nov to early May)

Email: mjpucillo@gmail.com

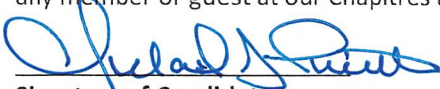
Phones: (W) (____) _____ (H) (____) _____

(WF) (____) _____ (HF) (____) _____

(S) (____) _____ (C) (561) 236-6531

Please list any other Sous-Commanderie memberships and associations with wine or food organizations held by the candidate and spouse:

The undersigned hereby agrees to abide by the policy of the Commanderie d'Amérique that fine wines are to be enjoyed, understood, and appreciated, but always consumed in moderation; and that wine is never to be served or consumed in excess by any member or guest at our Chapitres and other functions.


Signature of Candidate

Date of Scheduled Induction

Grand Sénéchal

Date of Application
Please Check Here if Probationary

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