MOUNT AIRY SOCIAL CLUB

128 Mount Airy Street
Saint Paul, MN 55130
Tel: 651-442-6620

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LOAN APPLICATION

NAME_____ date_____/_____/_____
last first middle month day year

ADDRESS: _____
street city state zip

PHONE_____

I THE UNDERSIGNED, WISH TO APPLY FOR A LOAN OF $_____FOR THE PERIOD OF _____MONTH(S)

(a) Amount Applying for $_____
(b) Interest Deduction (15%/20%) $_____
(c) Amount Received $_____
(d) Total amount due back $_____

I do further promised and agreed to pay back this loan in _____installments for a period of _____month(s)

a) First installment $_____ Due date _____
b) Second Installment $_____ Due date _____
c) Third Installment $_____ Due date _____
d) Fourth Installment $_____ Due date _____

Please note that payment must be completed at the end of each installment's due date or an additional amount of 5% Interest will be applied to any unpaid installment amount.

Amount received by_____ _____
PRINT NAME **SIGNATURE**

Collateral (a must) _____ _____
PRINT NAME **SIGNATURE**

Financial Officer_____ _____
(PRINT NAME) **SIGNATURE**

Treasurer_____ _____
PRINT NAME **SIGNATURE**

President_____ _____
Approved **SIGNATURE**

NOTE: LOAN APPLICATION FORM FEE: $10.00 (MEMBERS) AND $15.00 (NON-MEMBERS) AND ALL FEES ARE PAID BEFORE FUNDS ARE DISBURSED