

**L'Académie de Gastronomie
Brillat-Savarin**

Confrérie de la Chaîne des Rôtisseurs
National Administrative Office
Chaîne House at Fairleigh Dickinson University
285 Madison Avenue
Madison, NJ 07940-1099
Tel: 973.360.9200 Fax: 973.360.9330



Admission Form

Date: _____ **Chapter:** _____

Last Name: _____ **Gender:** ☐ Male ☐ Female

First & Middle Names: _____ **Citizenship:** _____
Date of Birth: _____

Home Address: _____ ☐ Use this mailing address ☐ Use this email
Street Address: _____ **Home Phone:** _____
City: _____ **Home Fax:** _____
State: _____ **Home Email:** _____
Zip Code: _____ **Mobile: (Optional)** _____
Country: _____

Business Information: _____ ☐ Use this mailing address ☐ Use this email
Type of Business: _____ **Work Phone:** _____
Position (Occupation Profession): _____ **Work Fax:** _____
Business Name: _____ **Work Email:** _____
Street Address: _____ **Mobile: (Optional)** _____
City: _____ **Website:** _____
State: _____
Zip Code: _____
Country: _____

Please list other gastronomic societies you belong to:

Why do you want to join the Brillat Savarin:

Signatures
First Sponsor Signature: _____ Second Sponsor Signature: _____
Bailli Approval Signature: _____ Applicant Signature: _____

Check must accompany this Application:

*Initiation Fee: \$60.00
National Annual Dues: \$35.00

Total Fees Payable to "Chaîne des Rôtisseurs": \$95.00

*Fee includes pin

Revised 5/2007