

*MEMBERSHIP APPLICATION*

Date \_\_\_\_\_

Please indicate:

New Member or Renewal

Mrs. Miss Ms. Mr. Dr.

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Residence Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

(Monthly newsletter will be sent email unless you tell us otherwise.)

Spouse Name \_\_\_\_\_

College/University \_\_\_\_\_

State \_\_\_\_\_ Year \_\_\_\_\_

Degree(s) \_\_\_\_\_

Major(s) \_\_\_\_\_

Birthday (mo/day) \_\_\_\_\_

Interest groups (circle):

Book Club

Cork & Fork

Computer

Drawing & Painting

Gardening

Lunch Bunch

Supper Club

Walking

Tell us a little about yourself:

- I'm joining AAUW because \_\_\_\_\_
- List passions, interests skills \_\_\_\_\_
- Are you interested in mentoring a scholarship recipient? \_\_\_\_\_
- Do you want to participate on our Board? \_\_\_\_\_
- What type position would interest you? \_\_\_\_\_
- I'm not sure, but ask me: \_\_\_\_\_
- I am joining as a (check one):

**BRANCH MEMBER \$81.00 / YR**

(Association, \$49.00/Yr, State \$16.00, Branch \$16.00) or

**\$40.50 /half year** (January through May)

**STUDENT AFFILIATE \$17.00 / YR**

Mail check and application to:

**AAUW Amador Branch  
P.O. Box 611  
Sutter Creek, CA 95685**

AAUW dues are not deductible as charitable contributions for federal income tax purposes, but may be deductible as ordinary and necessary business expenses.

**2008-2009**