



Membership Application

Contact Information	
Name	
Street Address	
City ST Zip Code	
Primary Phone	
E-mail Address	
Date of Birth	
Occupation	

Emergency Contact Information	
Name	
Street Address	
City ST Zip Code	
Primary Phone	
Work Phone	

How did you hear about us?			
<input type="checkbox"/> Website	<input type="checkbox"/> Social Media	<input type="checkbox"/> Event	<input type="checkbox"/> Current Member

What committee(s) are you interested in?		
<input type="checkbox"/> Art & Culture	<input type="checkbox"/> Civic Engagement	<input type="checkbox"/> Communications & PR
<input type="checkbox"/> Education	<input type="checkbox"/> Environment	<input type="checkbox"/> Fundraising
<input type="checkbox"/> Health & Wellness	<input type="checkbox"/> Membership	<input type="checkbox"/> Special Projects

Special Skills or Qualifications

Summarize special skills, qualifications and previous volunteer experience you have acquired from employment or through other activities, including hobbies or sports.

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Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I have read the membership requirements and hereby submit my application for consideration.

Name (Print)	
Signature	
Date	

Annual Membership Dues are \$55. Dues are paid to HGJWC, and a portion shared with the General Federation of Women's Clubs (GFWC).

