American Association of University Women Geneva Lake Branch Membership Application Form

Name:			Date:	
Address:	City/State			
Phone Numbers:(Home)(Cell)			
Email Address:				
Date of birth (month an	d date <u>only</u>):			
Spouse/Significant other	er:			
College/University atter	nded Degrees or Certificate	es earned	Major Field of St	tudy Yr Grad.
Professional Activities				
•	that you can join to support			olved! (at least 1)
Committees:			Interest Group)S:
Membership	Program	-	Bluestockings Book	(Club
Fundraising	Scholarship-STEM	-	Culinary Questers	
Public Policy	Publicity	-	Lunch Bunch	
Holiday Party	Leaders in Ed. Ceremony	-	Outdoor Activities	
Hospitality	The Big Read	-	Bridge	_Great Decisions
Skills that you can shar	e:			
Interest groups you wo	uld like to see get started:			
DUES:				
\$62.00 for National	Payment: C	heck Paya	ble to: Geneva La	ke Branch AAUW
\$13.00 for State	Che	eck#	Date rec	eived
\$15.00 for Branch	Cas	sh		_
\$90.00 Total annually* year		*Du	ies are collected i	n June of every
Thank you,				
Membership Chairs				