

**American Association of University Women**

**Geneva Lake Branch Membership Application Form**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ City/State \_\_\_\_\_

Full Time/ Part Time                  Retired/ Working

Phone Numbers:(Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

Email Address: \_\_\_\_\_

Date of birth (month and date only): \_\_\_\_\_

Spouse/Significant other: \_\_\_\_\_

College/University attended   Degrees or Certificates earned   Major Field of Study   Yr Grad.

\_\_\_\_\_  
\_\_\_\_\_

Professional/Community Activities:  
\_\_\_\_\_

What do you seek out of AAUW:  
\_\_\_\_\_

Check the Committees that you can join to support the branch and become involved! (at least 1)

<b>Committees:</b>		<b>Interest Groups:</b>
<input type="checkbox"/> Membership	<input type="checkbox"/> Program	<input type="checkbox"/> Bluestockings Book Club
<input type="checkbox"/> Fundraising	<input type="checkbox"/> Scholarship-STEM	<input type="checkbox"/> Culinary Questers
<input type="checkbox"/> Public Policy	<input type="checkbox"/> Communications	<input type="checkbox"/> Lunch Bunch
<input type="checkbox"/> Holiday Party		<input type="checkbox"/> Outdoor Activities
<input type="checkbox"/> Hospitality	<input type="checkbox"/> Casual/Social Activities	<input type="checkbox"/> Great Decisions

Interested in mentorship Y/N   In what areas: \_\_\_\_\_

**DUES:**

\$72.00 for National  
\$13.00 for State  
\$15.00 for Branch  
**\$100.00 Total annually\***

Payment: Check Payable to: **Geneva Lake Branch AAUW**  
Check# \_\_\_\_\_ Date received \_\_\_\_\_  
Cash \_\_\_\_\_

Thank you,  
Membership Chairs