



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)

Committees:

____ Membership

____ Program

____ Fundraising

____ Scholarship-STEM

____ Public Policy

____ Communications

____ Holiday Party

____ Hospitality

____ Casual/Social Activities

Interest Groups:

____ Bluestockings Book Club

____ Culinary Questers

____ Lunch Bunch

____ Outdoor Activities

____ Great Decisions

Interested in mentorship Y/N In what
areas: _____

DUES:

\$74.00 for National

\$13.00 for State

\$15.00 for Branch

Payment: Check Payable to: **Geneva Lake Branch AAUW**

Check# _____ Date received _____

Cash _____

\$102.00 Total annually*

**Please remit to: Carla Olson, 610 Settlers Ridge Drive,
Lake Geneva, WI 53147**