



# Alpine Woman's Club

## Membership Application

Please Print

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

First

Last

Address \_\_\_\_\_

Number

Street

City

State

Zip

Home Phone \_\_\_\_\_ Cell \_\_\_\_\_

E-mail Address \_\_\_\_\_ Birthday(Month/Day) \_\_\_\_\_

Member Sponsor Name \_\_\_\_\_

Attended two Meetings: Month \_\_\_\_ Day \_\_\_\_ Year \_\_\_\_ Month \_\_\_\_ Day \_\_\_\_ Year \_\_\_\_

Please check at least one event that you would like to participate in:

Holiday Home Tour [ ] Attic Treasures [ ] High Tea [ ]

Each member agrees to participate in joining a Luncheon Committee for at least one luncheon per year. This includes decorating the room and helping to prepare the meal. Please indicate which month of the current Club year you request:

Month: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Please return application and payment\* to the Club's Membership Chair during your third membership meeting or mail to:

Alpine Woman's Club PO Box 231 Alpine, CA 91903

\* \$60 for New Membership (after attending 2 meetings and obtaining a sponsor), which includes a \$20 one-time initiation fee and \$40 Annual Membership. Check payable to: Alpine Woman's Club.

***Thank you for your support of the Alpine Woman's Club!***

**Membership Year: September 1 through June 30**