



Alpine Woman's Club

Membership Application

Please Print

Name: _____ Date _____
 First Last

Address _____
 Number Street City State Zip

Cell Phone _____ Home Phone _____

E-mail Address _____ Birthday (Mo/Day) _____

How did you hear about the AWC? _____

Membership qualification requires attendance at two Membership Meetings:

Attended two Meetings: Meeting (1) Date _____ Meeting (2) Date _____

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 watch for the sign-up list every spring.

Please return this application and a check in the amount of \$70, payable to the Alpine Woman's Club, at a Luncheon Meeting or mail to the address below. (Amount includes a \$20 one-time initiation fee, and \$50 Annual Membership Dues.) If you prefer to use a credit card, there will be a \$2.00 service fee. See Membership Chair for Prorated Dues if joining between January 31 and May 31 of any given year. Our Membership Chair will notify you upon acceptance of your application.

Alpine Woman's Club
Attn: Membership
PO Box 231
Alpine, CA 91903

Thank you for your interest in joining the Alpine Woman's Club!