**Covington Woman’s Club**

Member of Georgia Federation of Women’s Club (GFWC Georgia)

Member of General Federation of Women’s Clubs (GFWC)

 **GFWC Georgia Mission**

*“GFWC Georgia is a statewide women’s volunteer organization dedicated to community improvement by enhancing the lives of others through volunteer service.”*

**MEMBERSHIP APPLICATION**

|  |
| --- |
| ***Personal Information*** |
| Name: | Date: |
| Home Address: |
| City: | State: | ZIP: |
| Home Phone: | E-mail: | Alternate phone/cell: |
| Employer: |
| Business Address: |
| Business Phone: | Business E-mail: | Profession: |
| Birthday (Month/Day): |
| **Club Interests and Miscellaneous** |
| How did you hear about our club or organization? Referral Website Other |
| Please provide a statement as to why you would like to become a member. |
| Please provide a brief bio of yourself with a photo for publication in our Club newsletter. |
| We have six Community Service Program areas – please choose which programs you may be interested in:**Arts Conservation Education Home Life International Outreach Public Affairs** |
| Please let us know if you have specific talents to lend us or hobbies you enjoy? |
| Do you want your name to be listed in the Club Directory/Yearbook? Yes No |
| **$??? Membership Dues & $10.00 Application Fee** Please make check payable to: ?? |
| **Club Use Only** |
| Sponsor: |
| Endorser No. 1: | Endorser No. 2: |
| Amount paid: | Method of Payment: |
| APPLICATION APPROVED BY EXECUTIVE BOARD: Month: Date: Year: |
| Renewal: Jan. 2018 through Dec. 31st 2018 (1 year membership) |

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Date

Name

Position (member, Board member, officer)

Please describe below any relationships, transactions, positions you hold (volunteer or otherwise, or circumstances that you believe could contribute to a conflict of interest between our club and your personal interests, financial or otherwise

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Please specify any other non-profit and for profit boards you sit on.

Signed