



## MEMBERSHIP APPLICATION

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NAME (First, Middle initial, Last):

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ADDRESS (Number and Street):

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CITY/STATE/ZIP CODE:

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

Have you been a member of AAUW in the past? Yes \_\_\_\_\_ No

If yes, what branch and for how many years? \_\_\_\_ Please list all degrees held, including Associates Degrees

COLLEGE: \_\_\_\_\_

DEGREE: \_\_\_\_\_ YEAR: \_\_\_\_\_

COLLEGE: \_\_\_\_\_

DEGREE: \_\_\_\_\_ YEAR: \_\_\_\_\_

COLLEGE: \_\_\_\_\_

DEGREE: \_\_\_\_\_ YEAR: \_\_\_\_\_

BIRTH DATE (Month and Day): \_\_\_\_

MEMBERSHIP TYPE:

Regular Membership Category:

\_\_\_\_\_ Dues: \$100

(Branch: \$21, State: \$12, National: \$67)

Student Affiliate Member:

\_\_\_\_\_ Dues: \$25.81

(Branch: \$5, State: \$2, National \$18.81)

**DONATIONS:**

Local SCHOLARSHIP Fund: \_\_\_\_\_

Legal ADVOCACY Fund: \_\_\_\_\_

STEM Robotics Team \_\_\_\_\_

ART CONTEST \_\_\_\_\_

TOTAL Amount Enclosed: \_\_\_\_\_

Make check payable to *AAUW Grosse Pointe* and mail to:

AAUW Grosse Pointe

32 Lake Shore Drive

Grosse Pointe Farms, MI 48236

Questions? Contact AAUW at [aauwgp@gmail.com](mailto:aauwgp@gmail.com)

I would like to become involved in the following:

- \_\_\_\_\_ Interest Groups
- \_\_\_\_\_ Serving on the Board
- \_\_\_\_\_ Serving on a Committee
- \_\_\_\_\_ Program planning
- \_\_\_\_\_ Fundraising
- \_\_\_\_\_ Membership
- \_\_\_\_\_ Other

My background is: \_\_\_\_\_

My interests are: \_\_\_\_\_

I am joining AAUW because: \_\_\_\_\_

How did you learn about AAUW? \_\_\_\_\_

Other comments: \_\_\_\_\_