



AAUW Traverse City Area Branch Membership Application

Website: www.aauwtc.org • Email: aauwtc@gmail.com

Date: _____

Name: _____

Cell phone: _____

Address: _____

Email address: _____

City/State/ZIP: _____

☐ Full Membership

Home phone: _____

☐ Student Affiliate

Work phone: _____

Occupation: _____

| College/university attended | Location | Degree | Field of Study |
|-----------------------------|----------|--------|----------------|
| | | | |
| | | | |
| | | | |

I'm interested in participating in the following Branch activities:

☐ Branch Meetings

☐ Lunch & Bridge

☐ State Theatre volunteers

☐ Book Sale

☐ Lunch at Lobdell's

☐ Suggestions for other
Branch activities:

☐ Daytime Book

☐ Thursday Evening Book

☐ Night Readers

☐ Poetry

COMMITTEES

☐ Holiday party

☐ Program (meeting/events)

☐ Public Policy

☐ Communications

☐ Fundraising

☐ Community Outreach

☐ Hospitality

☐ Other:

How did you learn about the AAUW-TC Branch? _____

Previous membership in AAUW: Branch name, location, dates (*continue on back if necessary*):

Dues (includes publications)

| | |
|---|-------------------------------|
| Regular Dues: TC Branch, Michigan State, and AAUW Association (National), July 1-June 30 | \$95 (\$80 tax-deductible) |
|---|-------------------------------|

Contact Finance Officer regarding special dues categories, i.e., dual membership, life membership, student affiliate: 574-276-8923, emoore9706@gmail.com.

**Send this form with your check (payable to AAUW-TC Branch) to:
Betsy Moore, AAUW-TC, P.O. Box 1142, Traverse City, MI 49685**