



## Woman's Club of West Deptford Membership Application

Date:	First Name:	Last Name:	
DOB:	Spouse/Significant Other:		
Street Address:			
City:		State:	Zip:
Best Phone Number:		Email address:	
Currently Employed: (circle) Yes No		Current / Previous Profession	
Do you own a computer (circle) Yes No		Comfort Level w/ Computer (circle) None Medium Great	
Do you own a smartphone (circle) Yes No		If yes, do you text? (circle) Yes No	
<b>Please Check All Areas of Interest:</b>			
<b>Arts:</b>		<b>Home/Health Life:</b>	
<input type="checkbox"/> Art (General)		<input type="checkbox"/> Financial Issues	
<input type="checkbox"/> Book Club		<input type="checkbox"/> Women's Health	
<input type="checkbox"/> Sewing		<input type="checkbox"/> Women's Safety	
<input type="checkbox"/> Literature		<input type="checkbox"/> Nursing	
<input type="checkbox"/> Photography		<input type="checkbox"/> Health Issues in General	
<input type="checkbox"/> Crafts		<input type="checkbox"/> Staying Healthy	
<input type="checkbox"/> Performing Arts (drama, comedy, etc.)		<input type="checkbox"/> CPR	
<input type="checkbox"/> Music/Singing/Dance		<input type="checkbox"/> Other	
<b>Conservation:</b>		<b>Legislative: (non-partisan)</b>	
<input type="checkbox"/> Environmental/Recycling		<input type="checkbox"/> Women's Issues	
<input type="checkbox"/> Animal Protection		<input type="checkbox"/> Volunteering at Polling	
<input type="checkbox"/> Township beautification programs		<input type="checkbox"/> Community Issues	
<input type="checkbox"/> Trees/Plants		<input type="checkbox"/> School legislation	
<input type="checkbox"/> Community Gardening		<input type="checkbox"/> General Legislative Issues	
<input type="checkbox"/> General conservation issues		<input type="checkbox"/> Woman's Club Legislative Issues	
<b>Education and Libraries</b>		<b>Civic Engagement:</b>	
<input type="checkbox"/> Promoting youths, both male and female with education opportunities		<input type="checkbox"/> Food and Clothing Drives	
<input type="checkbox"/> Scholarship programs		<input type="checkbox"/> Veteran/Military Support	
<input type="checkbox"/> Volunteering in schools		<input type="checkbox"/> Parade participation	
<b>Domestic Violence:</b>		<b>Communications:</b>	
<input type="checkbox"/> Shelter support		<input type="checkbox"/> Member communications	
<input type="checkbox"/> Increasing knowledge and awareness		<input type="checkbox"/> Facebook/Instagram	
<input type="checkbox"/> Teen dating and violence		<input type="checkbox"/> Using CANVA or other graphic program	
<input type="checkbox"/> Elder abuse		<input type="checkbox"/> Mass mailings (etc.)	
<b>Child Advocacy Issues:</b>		<b>History:</b>	
<input type="checkbox"/> Projects related to the safety and well-being of children		<input type="checkbox"/> Woman's History	
<input type="checkbox"/> Supporting children with childhood diseases		<input type="checkbox"/> History projects in general	
<b>Other:</b>			
<input type="checkbox"/> Fundraising		<input type="checkbox"/> Event Planning	
<input type="checkbox"/> Socializing with members in general		<input type="checkbox"/> Crafts in general	
<input type="checkbox"/> Dinners/lunches		<input type="checkbox"/> Decorating	

How did you hear about the Woman's Club of West Deptford?	
Areas of Personal Concern or Community Concern:	
<b><i>I hereby apply for membership in the Woman's Club of West Deptford and agree to abide by its Bylaws and Standing Rules.</i></b>	
Applicant Signature:	Membership Chair Signature:
Dues Paid on (Date joined):	Annual Dues or Prorated Dues Amount