

American Association of University Women - Seattle Branch
2017 - 2018 Membership Application
Regular Branch Membership
~ a powerful network of educated women ~

Date: _____ Dr./Ms./Miss/Mrs./Mr.

Name: _____ Birthday: ____/____
Month/Day

Address: _____

City: _____ State: _____ Zip: _____

Phone (H) _____ (W) _____ (C) _____

E-Mail: _____

College or University Degrees:

College/University _____ State: _____

Degree _____ Year: _____

College/University _____ State: _____

Degree _____ Year: _____

College/University _____ State: _____

Degree _____ Year: _____

Would you like to receive the newsletter via *e-mail* or *snail mail*? (circle one)

Membership Dues Include:

Association \$49

State 10

Branch 16

Total \$75

Mail application and check payable to **AAUW Seattle** to
Judy Waring, 4127 SW Kenyon St., Seattle, WA 98136-2332