

## Welcome to the Medford Branch of AAUW New Member Application Form

Fiscal Year July 1, 2019-June 30, 2020

Mail Membership Form and check to: AAUW Medford, Attn.: Monica Weyhe, PO Box 1204, Medford, OR 97501

Date	 	 _

Chk #\_\_\_\_\_

Phone 541-326-8042, e-mail monicaw655@gmail.com

Annual Dues (see back for de	ues structure):				
New Member	\$90.00*	*\$56 is tax deductible			
New Member (Shape the	\$60.50**	**\$26.50 is tax ded	luctible as a charitable		
Future Program)Nametag (one time fee)	\$ 9.00	contribution for fed	contribution for federal income tax purposes		
		ACE MAKE CHECK DAY	ADI E TO A ALIM		
Total Payment	PLEA	ASE MAKE CHECK PAYA	IBLE TO AAUW		
Please Print: Name (last)	(first)		Today's Dat	te	
Address (Street, City, State, ZIP)					
Home Phone Mobile I	Phone	*E-mail Address			
College/University	State	Degree(s)	Major		
College/University	State	Degree(s) Major		—	
*Email is our default communic know if that is the case.	ation tool. We will ema	ail your newsletter, unless	you cannot use email. Please let us	3	
I may be interested in helping	g in the following area	as (please check):	have experience with (please che	ck)	
PROJECTS	BRANCH	I ACTIVITY	SKILLS		
Scholarship Selection	Program P	lanning Committee	Design and graphics		
RCC Liaison/projects	Interest Gr	oup Coordinator	Database management		
Garden Tour	Directory/d	lata manager	Website maintenance		
One time community project	tThe Musing	gs Newsletter	Social networking		
	Phone Tree	е	Photography		
MEETINGS	Elected Off	ficer	Writing/editing		
Greeter	Committee	e member/chair	Public Speaker	Public Speaker	
Hospitality	New memb	per mentor			
Minutes recorder					
Signed					