



# Amery Woman's Club

PO Box 94 - Amery, WI 54001

## Membership Form

**Please fill in as completely as possible. We are updating the membership roster. Please indicate information not to be shared.**

FISCAL YEAR: \_\_\_\_\_

Name \_\_\_\_\_

Address: \_\_\_\_\_

City/Zipcode \_\_\_\_\_ email \_\_\_\_\_

Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

If renewing your membership, please list the year you originally joined \_\_\_\_\_

Birth Month and Day \_\_\_\_\_ (year optional) \_\_\_\_\_

Do you have Thrivent Access? \_\_\_\_\_yes \_\_\_\_\_no

Current dues \$35.00 Paid check \_\_\_\_\_ Paid cash \_\_\_\_\_ Date Paid \_\_\_\_\_

### Multimedia Release:

\_\_\_\_ **Yes** \_\_\_\_ **No**: I will allow Amery Woman's Club to use photos and videos of myself in promotional material, including our Website, Facebook, or other current media software.

Signature \_\_\_\_\_

Date \_\_\_\_\_



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