

IWCNE MEMBER INFORMATION SHEET

For new membership or renewal, print this form, complete and return with your \$40 dues to the address below

NAME: _____

SPOUSE OR SIGNICANT OTHER: _____

MAILING ADDRESS: _____

ALTERNATE ADDRESS: (note dates) _____

HOME PHONE (with area code): _____

CELL PHONE (with area code): _____

E-MAIL ADDRESS: (keeps cost of mailing down) _____

COUNTRIES OF CLOSE ASSOCIATION: _____

LANGUAGES SPOKEN _____

Please indicate if you are interested in learning more about the following:
(Being a member of one or more of the interest groups is a wonderful way to meet members you might not otherwise see on a regular basis.)

Book club ___ World Cinema _____ French club _____

Trips /Activities _____ Choral Singing/Instrumental Music _____

New Group Idea _____

Your help is invaluable and is the only way we can continue to provide quality programs, increase our membership and raise funds to support our charities which benefit women and children.

Serving in a leadership capacity as chair of a project or program _____

Member of Fund Raising and Charity Selection Committee _____

Please return this form with your \$40 dues to:
Membership Chair,
c/o IWCNE, Box 351, Cape Neddick, ME 03902