



JUNIOR WOMAN'S CLUB of Midtown

MEMBERSHIP APPLICATION

YOUR INFORMATIO	N				
Name:					
Street Address:					
City:		Sta	te:	Zip:	
Phone:					
Employer & Title:					
E-Mail Address:					
Birthday: (Month/Day)					
What types of volu	nteer service a			ut?	
Please indicate ar	reas of expertise	e or interest:			
☐ Graphic Design	☐ Fundraising	□ Social Med	ia □ Pſ	R/Community Outre	each
□ Event Planning	□ Other:				
EMERGENCY CONTA	.ст				
Name:					
Street Address:					
City:		Sta	te:	Zip:	
Phone:					
E-Mail Address:					
Signature:			Date		

Annual dues are \$40 and should be submitted with your application. Please make checks payable to JWC of Midtown. This application can be emailed to midtownjuniors @gmail.com or mailed with your dues to GFWC Junior Woman's Club of Midtown at PO BOX 14643; Tallahassee, FL 32317.