



North State Writers (NSW)

A Branch of the California Writers Club (CWC)

www.northstatewriters.com/ Friend Us on Facebook

Membership Application

First Name: _____ Last Name: _____ MI: _____
 Address: _____ City: _____ Zip: _____
 Phone: (_____) _____ - _____ Email: _____
 Website: _____ FaceBook: Yes No
 Genre (s) (Required): _____ Branch (If Dual Member): _____
I hereby authorize North State Writers to share the following directory information with other members of the North State Writers. I may revoke this authorization at any time by written, dated communication with the NSW Board.
 Email Address Phone Signature _____ Date _____

Application for Membership Category

- Active Member—Published. Include copies of published works and indicate genre.
- Associate Member—Aspiring Writer and/or Non-Writing Literary Professional (Editor, Illustrator, Publisher, Agent)
- Supporting Member—Writing Interest, Benefits same as Active & Associate Members

Membership Fees

NSW Membership Fees are due by July 30th and incurred at the beginning of each Fiscal Year as follows:

1. July 1st-Jun 30th (one year): \$45 Plus CWC New Member ONE TIME Fee of \$20 = Total of \$65
2. Jan 1st-Jun 30th (half-year): \$22.50 Plus CWC New Member ONE TIME Fee of \$20 = \$42.50
3. Dual CWC Member Fee: Total of \$25
4. Student Membership (enrolled in 6+ Units): \$20 Plus CWC New Member ONE TIME Fee of \$20 = \$40.00

FEE PAYMENT

Membership fees may be paid via **PayPal** at www.northstatewriters.com (select the *Shopping Cart* tab) or by check or money order made payable to North State Writers and mailed attention: Membership Director

North State Writers
 P.O. box 6734
 Chico, CA 95927-6734

Please complete the *NSW Membership Application* and include your Membership Fee with the mailed application or submit payment via PayPal, prior to mailing.

Membership Applications and Fees are also accepted at the NSW's Monthly Meetings!

For questions and/or concerns regarding membership in the North State Writers, please email our Membership Director at northstatewriters@gmail.com

| TO BE COMPLETED BY THE NSW MEMBERSHIP DIRECTOR: EVENT | DATE | For NSW by (Name) | Active Applications | DATE | For NSW by (Name) |
|-------------------------------------------------------|------|-------------------|---------------------|------|-------------------|
| App Received | | | Material Submitted | | |
| Dues Received | | | Review Completed | | |
| Check Number | | | Membership Decision | | |
| Entered in MRMS | | | | | |
| Dues Deposited | | | | | |