

**NEWCOMERS OF CENTRAL FLORIDA, INC.  
MEMBERSHIP FORM 2024-2025**

Newcomers of Central Florida, Inc. is a women's social club that offers friendship, fun and a variety of entertaining and informative programs. Membership is not limited to people who are new to the area but is open to any women who would like to make new friends. New members are accepted all year. Dues are \$25 per year or \$12.50 for those *first-time* members joining January-May. Please mail this **signed and completed form** along with a check payable to Newcomers of Central Florida, Inc. to:

**Brenda Jones, 677 Oneida Lane, Winter Springs, FL 32708**  
Cell: (407) 435-3026 Email: [bjones47@cfl.rr.com](mailto:bjones47@cfl.rr.com)

**MEMBER INFORMATION**

Name: First \_\_\_\_\_ Last \_\_\_\_\_ Husband \_\_\_\_\_

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

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Subdivision: \_\_\_\_\_

Telephone: Home: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

Date of Birth: Month \_\_\_\_\_ Day \_\_\_\_\_ Originally from: \_\_\_\_\_

Leadership/major positions held in other organizations: \_\_\_\_\_  
\_\_\_\_\_

Activities interested in: \_\_\_\_\_  
\_\_\_\_\_

I am interested in **HELPING** with the following committees:

Activities/Game Day\_\_\_\_, Fashion Show\_\_\_\_, 50/50\_\_\_\_, Helping Hands\_\_\_\_, Hospitality\_\_\_\_,  
Inside the Arts\_\_\_\_, Newsletter\_\_\_\_, Outreach\_\_\_\_, Publicity\_\_\_\_, Reservations\_\_\_\_,  
Scrapbook/Photos\_\_\_\_, Special Events\_\_\_\_, Ways & Means\_\_\_\_, Website\_\_\_\_.

Copies of the current and past *Chatter* newsletters are available on our website: [www.newcomerscfl.org](http://www.newcomerscfl.org).

**NEWCOMERS OF CENTRAL FLORIDA RELEASE**

I hereby release Newcomers of Central Florida, Inc., as well as all past, present, and future directors and all persons in privity with the organization and directors individually or in any combination, from any and all claims of every kind and character, or are hereafter to arise, directly or indirectly, resulting from meetings or activities associated with the organization and damages resulting there from by whomsoever suffered. Further, I do covenant to and with the parties in whose favor this release is executed that I am authorized to execute this release. And I do hereby indemnify the party in whose favor this release is executed and will save and hold each harmless from any claim on the part of anyone whomsoever. I certify that I have read the above and the foregoing release and hereby agree to its contents.

**Member Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Paid By: Check # \_\_\_\_\_ Cash \_\_\_\_\_ Total Amount \_\_\_\_\_

New Member \_\_\_\_\_ Renewal \_\_\_\_\_

How did you hear about Newcomers of Central Florida, Inc.? \_\_\_\_\_

**For Membership Chairperson Only:**

Date Received: \_\_\_\_\_ Amount Paid: \_\_\_\_\_ Signature \_\_\_\_\_