



Sept 20__ to Aug. 20__

MEMBER UPDATE APPLICATION FORM

Middletown Business & Professional Women's Club

P.O. Box 1005 • Middletown, NY 10940

<http://www.BPWMiddletownNY.org>

Please fill in completely even if you do not have any changes

Name of Member _____ Birthday _____ / _____

MONTH DATE

Home Address _____

City _____ State _____ Zip _____

Email Address _____

Home # _____ Cell # _____

Employer _____ Business # _____

Position Held _____

Any other organizational affiliations: (also note any offices you may/are holding)

Committee's Interested in:

- | | |
|---|--|
| <input type="checkbox"/> Fashion Show | <input type="checkbox"/> Historian / Photographer |
| <input type="checkbox"/> Ways and Means | <input type="checkbox"/> Nominating |
| <input type="checkbox"/> Membership | <input type="checkbox"/> Missing Pins |
| <input type="checkbox"/> Scholarship | <input type="checkbox"/> Happy Dollars |
| <input type="checkbox"/> Thanksgiving Baskets | <input type="checkbox"/> \$5.00 Club |
| <input type="checkbox"/> Mother's Day | <input type="checkbox"/> Publicity |
| <input type="checkbox"/> Dinner | <input type="checkbox"/> Website |
| <input type="checkbox"/> Welcoming | <input type="checkbox"/> Safe Home Holiday Wish List |
| <input type="checkbox"/> Social Club | |

Comments / Suggestions:

Signature of Member _____ Date _____

Please Attach \$25.00 Membership Dues