



# Bedford Women's Club Membership Form

<b>Last Name:</b> _____	<b>First Name:</b> _____
<b>Spouses Name</b> _____	<b>Email:</b> _____
<b>Street Address:</b> _____	<b>City/State/Zip:</b> _____
<b>Home Phone:</b> _____	<b>Mobile Phone:</b> _____
<b>Birthday (Month/Day):</b> _____	<b>Year Joined:</b> _____

### Type of Membership

<b>Select one:</b> <input type="checkbox"/> New <input type="checkbox"/> Renew <i>(\$10 late fee if paid after 5/31)</i>	<b>Select one:</b> <input type="checkbox"/> Active: \$50 dues <i>(June 1-May 31)</i> <input type="checkbox"/> Non-Resident: \$25 dues <i>(written request, members only moving 50+ miles away)</i> <input type="checkbox"/> Life: No dues <i>(written request, 10+ years &amp; 75+ years old, donations accepted)</i> <input type="checkbox"/> Past-President: \$50 dues <i>(exempt prior 2011, donations accepted)</i>
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### Monthly Luncheon (required)

<b>Monthly Luncheon Duty:</b> Active Members & Past Presidents must serve at one monthly luncheon per year <i>(PP exempt prior 2011)</i>	<b>Select <u>First</u> Choice:</b> <input type="checkbox"/> Sept. <input type="checkbox"/> Oct. <input type="checkbox"/> Nov. <input type="checkbox"/> Jan. <input type="checkbox"/> Feb. <input type="checkbox"/> Mar. <input type="checkbox"/> Apr.	<b>Select <u>Second</u> Choice:</b> <input type="checkbox"/> Sept. <input type="checkbox"/> Oct. <input type="checkbox"/> Nov. <input type="checkbox"/> Jan. <input type="checkbox"/> Feb. <input type="checkbox"/> Mar. <input type="checkbox"/> Apr.
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<b>Monthly Luncheon Chair:</b> Each luncheon has one assigned chairperson responsible for heading the luncheon	<b>Would you chair a luncheon?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
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### Membership Committees (optional)

**Please check any committee you would like to participate in:**

<b>Standing Committees:</b> <input type="checkbox"/> Finance Committee <i>(Investment)</i> <input type="checkbox"/> Membership Committee <input type="checkbox"/> Program Committee <input type="checkbox"/> Public Relations Committee <i>(Publicity)</i> <input type="checkbox"/> Scholarship Committee <input type="checkbox"/> Ways & Means Committee <i>(Fundraising)</i>	<b>Special Committees:</b> <input type="checkbox"/> Calling Committee <input type="checkbox"/> Greeters Committee <input type="checkbox"/> Holly Luncheon Committee <input type="checkbox"/> Time and Talent Committee <input type="checkbox"/> Transportation Committee <input type="checkbox"/> Yearbook Committee	<input type="checkbox"/> Website Committee <input type="checkbox"/> Whale of a Sale <i>(not every year)</i> <input type="checkbox"/> Monthly Charitable Committee: Suggested charity: _____ <i>(Note: With your suggestion, you will chair that month's donation)</i>
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### Interest Groups (optional)

**Please check any interest groups you would like to participate in:**

<input type="checkbox"/> Book Group (BO) <input type="checkbox"/> Bridge (BR) *waitlist <input type="checkbox"/> Bridge sub (BRS) <input type="checkbox"/> Bunco (BU) <input type="checkbox"/> Couples Brunch (CB) <input type="checkbox"/> Couples Dinner (CD)	<input type="checkbox"/> Cooking w/Friends (CO) *waitlist <input type="checkbox"/> Culture/Fun Events (CU) <input type="checkbox"/> Genealogy (GE) <input type="checkbox"/> Hiking (H) <input type="checkbox"/> Knitting/Crocheting (KC)	<input type="checkbox"/> Lunch Out (L) <input type="checkbox"/> Mah Jongg (MJ) <input type="checkbox"/> Photography (PH) <input type="checkbox"/> Poker (PO) <input type="checkbox"/> Rummikub (RU) <input type="checkbox"/> Scrabble (SC)	<input type="checkbox"/> Snowshoeing (SN) <input type="checkbox"/> Tennis (T) <input type="checkbox"/> Walking (WK) <input type="checkbox"/> Other: _____
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<b>Please mail completed form and payment to:</b>	Bedford Women's Club / Membership Committee PO Box 10015 Bedford, NH 03110
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### Membership Committee Use *(Please Do Not Fill-In)*

<b>Date Received:</b>		<b>Check #:</b>		<b>Amt. Paid:</b>	
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