



MEMBERSHIP FORM

AAUW Long Beach Branch

Please Join Us!

I would like to join as a Branch member (\$91)* or I would like to join as a Member At Large (\$49)*

Mail this form to: Carol Smith
16715 Hampton Ct.
Cerritos, CA 90703

Please make your check out to
AAUW, and include it with your
Membership Form

Membership in AAUW-LB is open to anyone with an associate's degree or higher from an educational institution with full regional or appropriate professional association approval. Student Affiliates are eligible if they are enrolled in an associate's degree or higher program at an educational institution with full regional or appropriate professional association approval.

*Membership dues include National (\$49, \$46 is tax deductible), State (\$16), and Branch (\$26)

Contact Information

First Name _____ M.I. _____
Last Name _____ D.O.B. ___/___/___
Address 1 _____
Address 2 _____
City _____ State _____ Zip _____
Phone (H) _____ Phone (C) _____
Email _____

Other Information

College/University _____
Degree Obtained/Sought _____
Year Earned/Anticipated Graduation _____
Employed Position _____
Company _____

Please see other side for additional information...



MEMBERSHIP FORM (continued)

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Please Join Us!

Tell us about yourself!

What other volunteer activities and organizations are you involved with?

Do you hold, or have you held, a leadership position in any of these organizations? Please describe.

Have you ever been an AAUW member? { } Yes { } No

If so, under what name? _____

Name of former branch _____

City State Zip

Would you be willing to receive the branch newsletter via email? Yes _____ No _____

Applicant's signature _____ Date: _____

Signature of Branch Membership Vice President Verifying Eligibility

Date