



MEMBERSHIP APPLICATION FORM

Date					
Name				Birthday	
Street Address		C	City		
State		Z	Zip Code		
Home Phone	Email Addres	SS	S		
Cell Phone	Emergency C	Emergency Contact Name			
Spouse Name (optional)	Emergency C	Emergency Contact Phone			
How would you like to be involv					
How did you hear about us? Friend/Colleague/Neighbor:					Yelp
Event:		0	ther:		
I WOULD LIKE TO MAKE A CON	TRIBUTION TO THE CL	UBHOUSE	PRESERVATION F	UND: \$	
Please make your check includi i	ng application fee, ann	nual dues, a	and clubhouse pr	eservation fund contrib	ution (if

Please make your check including application fee, annual dues, and clubhouse preservation fund contribution (if applicable) payable to the Redwood City Woman's Club.

	Annual Dues	Application Fee	TOTAL AMOUNT		
	Under age 65				
On or before May 31	\$85.00	\$50.00	\$135.00		
After May 31	\$42.50	\$50.00	\$92.50		
Age 65 and over					
On or before May 31	\$60.00	\$50.00	\$110.00		
After May 31	\$30.00	\$50.00	\$80.00		

Mail or bring completed form and check to:

Redwood City Woman's Club 149 Clinton St. Redwood City CA 94062

Attn: Membership Chair