



2023-2024 Membership Registration Form

Your application will be considered incomplete and cannot be processed without the required information, which is annotated by an asterisk (*).

*Full Name:	Spouse/Partner Name:
*Address:	Birthday (mm/dd)
*City, State, Zip:	*Email:
*Home Telephone (if applicable): *Mobile Number (if applicable):	*Emergency Contact:
*Today's Date:	*Emergency Contact Number:
*Where did you live before moving to W-S?	*How did you learn about us?

Newcomers & Neighbors of Winston-Salem, Inc. enjoy many weekly, monthly, or quarterly activities. Below, please check any activities that may be of interest to you. The coordinator(s) for the selected activities will contact you to answer any questions and invite you to their next scheduled event. You are under no obligation to participate, but we hope you do!

Activities:

- | | | | |
|------------------------------------|---|--|--|
| <input type="checkbox"/> Book Chat | <input type="checkbox"/> Breakfast Club | <input type="checkbox"/> Cards | <input type="checkbox"/> Community Service |
| <input type="checkbox"/> Day Trips | <input type="checkbox"/> Dinner Out | <input type="checkbox"/> Garden Group | <input type="checkbox"/> Lunch Bunch |
| <input type="checkbox"/> Mahjong | <input type="checkbox"/> Socials | <input type="checkbox"/> What's Cooking? | <input type="checkbox"/> Wine Tasters |

Have an idea for a new activity? Please contact a board member.

For the fiscal year 2023-2024, the annual membership fee is \$30.00. This period starts on October 1, 2023, and ends on September 30, 2024. If you choose to join the organization between February 1 and May 31, 2024, you will be charged a prorated fee of \$20.00. If you decide to become a member from June 1 to September 30, 2024, the cost is \$10.00.

* I, _____ give/ do not give Newcomers & Neighbors of Winston-Salem, Inc. permission and consent to use my likeness, to be included in, but not limited to, marketing, illustration, and web content. If at any time I wish to revoke my permission and consent, I may submit the revocation in writing to the membership manager of Newcomers & Neighbors of Winston-Salem, Inc.

*** Member Signature** _____ *** Date** _____

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*** Spouse/ Partner Signature** _____ *** Date** _____

Please complete this form and mail it with your check to the address below.
Newcomers & Neighbors of Winston-Salem, Inc., Director of Membership
P.O. Box 26181, Winston-Salem, NC 27114
336-303-0622