

2024-2025

MEMBERSHIP APPLICATION

Date: _____



WOMEN'S INTERFAITH NETWORK

Sharing Traditions

Membership is open to all women in the Sarasota/Manatee vicinity

<https://womensinterfaithnetwork.org>



Name: _____

Email: _____

Address: _____

Phone(s): _____

Your faith tradition/Congregation: _____

Birthdate Month/Day: ____/____

COMMON TABLES*

Sarasota; check here: ____

Venice; check here: ____

Please number your TWO choices for a Common Table Day/Time:

____ Monday Lunch

____ Tuesday Lunch

____ Wednesday Lunch

____ Thursday Lunch

____ Friday Lunch

____ Saturday Lunch

____ Sunday Afternoon

____ Weekday evening

** Each group is intended to represent women of different faith traditions and different congregations.*

Are you interested in a MOVIE GROUP? check here: ____

Are you interested in a BOOK CLUB focused on religion, faith and spirituality? Check here: ____

Are you interested in a GENERAL TOPIC BOOK CLUB? Check here: ____

Please share your skills, interests and talents here: YOUR PARTICIPATION IS VITAL FOR WIN'S SUCCESS _____

I grant WIN permission to post photos of me on its website: Yes ____ No ____

I grant WIN permission for my name, email and address, and phone be included in the Membership Directory:

Yes ____ No ____

The information in the Directory can only be used for WIN purposes. Misuse will result in dismissal.

Please mail the completed application and annual dues in the sum of \$20.00 made out to WIN to:

Susan Keal, 8253 Shadow Pine Way, Sarasota, FL 34238-5621

Any questions? Contact Membership Chair: susanskovronek@gmail.com or 973-224-2980