

Member of General Federation of Women's Clubs Member of California Federation of Women's Clubs Member of CFWC Orange District

P.O. Box 169, Cypress, California 90630

January 2025

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We are happy that you are interested in joining the Woman's Club of Cypress! Please complete this form, make your check payable to <u>Woman's Club of Cypress</u> and return it at a meeting or mail to:

Woman's Club of Cypress Attn: Cheri Summers, Membership P.O. Box 169, Cypress, CA 90630

 I am enclosing \$55.00 for 2025-2026 membership dues I am enclosing \$11.00 for a name badge (optional) I am enclosing \$ 5.00 for a membership pin (optional) I am returning the emergency contact form in a sealed envelope 	
Name	Spouse/Partner
Address	
	Zip Code
Email	
Home Phone #	Cell Phone #
Birthday (Month/Day) Referred	by
Please indicate which programs/projects interest your Arts/Culture Domestic Violence Prevention Civic Engagement/Community Outreach (Veteral Please indicate any other interest you may have, or to	onEducation/Libraries Environment ans) Health/Wellness Advocates for Children
Thank you from your 2 nd VPs/Membership:	