

THE WOMAN'S CLUB OF CRANBURY

College District

New Jersey State Federation of Women's Clubs

Date: _____

Name: _____

Spouse's Name: _____

Address: _____

Phone: _____ E-mail Address: _____

Have you ever been a member of a Federated Woman's Club? Yes: ☐ No: ☐

If yes, please state when and where: _____

Reason for leaving club: _____

Civic activities and other organizations: _____

Have you ever held and office in any organization? Yes: ☐ No: ☐

If yes, please list the organization and office held: _____

Please check which departments of the Woman's Club of Cranbury interest you the most:

☐ ARTS/CREATIVE

☐ HOME LIFE/SOCIAL SERVICES

☐ CONSERVAION & GARDENING

☐ PUBLIC AFFAIRS

☐ DRAMA & LITERATURE

☐ HIKING Focus Group

☐ GOURMET

☐ INTERNATIONAL AFFAIRS Focus Group

Do you have any experience or special interest in the following committees?

☐ COMMUNICATION

☐ NEWSLETTER

☐ SCHOLARSHIP

☐ EDUCATION

☐ NOMINATING

☐ SUNSHINE

☐ HISTORICAL

☐ PROPERTIES

☐ WAYS & MEANS

☐ MEMBERSHIP

☐ PUBLIC RELATIONS

☐ WEBSITE

Plan to attend two club activities before your application can be presented to the Board.

Candidates for membership shall be considered based on their willingness to participate in and assume responsibility for club activities. Please return this completed application to either club member listed below, along with a check made payable to The Woman's Club of Cranbury for one of the following amounts:

\$65.00 total if joining May to December (\$15.00 application fee plus \$50.00 full annual dues).

\$40.00 total if joining January to April (\$15.00 application fee plus \$25.00 half-year dues).

Proposed by: _____ Endorsed by: _____

***Mail completed form to The Woman's Club of Cranbury, PO Box 94, Cranbury, NJ 08512