

MONTGOMERY COUNTY, MARYLAND SECTION NATIONAL COUNCIL OF NEGRO WOMEN, INC.

Your Membership Will Make a Difference!

MEMBERSHIP APPLICATION (New/Renewal)

Yes, I want to make a difference by becoming a member of the MCMD Section, NCNW, Inc. Yes, I want to renew my membership with the MCMD Section, NCNW, Inc.

I.	PERSONAL INFORMATION
Saluta	tion
Name	
E-mai	1
Mailir	ng Address
City_	State Zip
Birthd	ay (Day/Month Only)
Telepl	none (Day)Telephone (Evening)
Skills_	
Hobbi	es, Special Interests
W	PLEASE CHECK COMMITTEE(S) FOR WHICH YOU MIGHT LIKE TO SERVE: mior Citizens People-in-Crisis Education Health Publicity Legislative ays-n-Means Black History Holiday Celebration Membership Hospitality ethune Height Recognition Retreat Planning Social Media
III.	ANNUAL MEMBERSHIP DUES: Check only ONE box
\$5	0.00 (Paid in full Life or Legacy Member)
\$1	00.00 Annual Dues (\$50 National dues and \$50 Section dues)
	00 National, plus \$50 Section Dues and \$50 National dues. (If you desire to become a Life Member - nents must be paid within 1 year; thereafter, your annual Section dues of \$50 will be due).
	000 National, plus \$50 Section Dues and \$50 National dues. (If you desire to become a Legacy Member - nents must be paid within 1 year; thereafter, your annual Section dues of \$50 will be due).
Montg Attent	gomery County, MD NCNW ion: Financial Secretary Box 1512

Silver Spring, MD 20915-1512

For More Information, contact us at please contact ncnwmc@gmail.com