

## "WOMEN IN UNITY SUPPORTING THE COMMUNITY"

## APPLICATION FORM FOR MEMBERSHIP

Please Check Annual Fee:	// \$25 - New Membe	er // \$20 - Renewal
Name:	Date of B	irth:
Full Address:		
Email:	Phone	e No
Occupation:	Marital Status:	
Province of Origin (Philippines) _		Recommended by:
What are you most interested in	joining? Please check one	<b>2.</b>
// Community Work	// Organizing	// Fund Raising
// Volunteer Work	// Church Activities	// Dancing
// Others: Please specify:		
By signing this application I am v Constitution and By-laws of the	-	
Applicant Signature:	Date S	Signed:
OFWC President Signature: Name of President : EME E-mail address : ems Phone No. : 647	ELYN QUINTO Name q54@gmail.com Treas	ture of OFWC Officer: of OFWC Officer: urer's Initial: