



Hacienda Heights Women's Club

P.O Box 5565, Hacienda Heights, CA 91745

MEMBERSHIP APPLICATION

Please consider my application for membership in the Hacienda Heights Women's Club. I understand and agree to promote the goals and purposes of the club. I understand that the dues are \$40 annually.

Annual dues are from June to June. We renew dues Feb/Mar for the following year. Please mail dues to P.O. Box 5565, Hacienda Heights, CA 91745

NAME: _____

BIRTHDAY: _____

ADDRESS: _____

MOBILE PHONE: _____

HOME PHONE: _____

EMAIL: _____

OCCUPATION/CAREER: _____

SIGNIFICANT OTHER'S NAME: _____

CHILDREN(S) NAME(S) / AGES: _____

HOBBIES: _____

TALENTS & SKILLS: _____

COMMUNITY SERVICE & AFFILIATIONS: _____

SIGNATURE: _____ DATE: _____

(for office use only)

- ☐ \$40 membership dues collected
- ☐ Name on badge _____
- ☐ Photo taken for yearbook
- ☐ OK for photo to be used in newsletters, yearbook, & other publications Y / N
- ☐ Badge given
- ☐ Yearbook given