Sterling Women's Club

Volunteers dedicated to community service since 1943

APPLICATION FOR MEMBERSHIP

DATE: _____/_____/_____

NAME: _____

ADDRESS: _____

_____

_____

PHONE: _____

EMAIL: _____

BIRTHDAY: Month: _____ Day: _____

How would you most prefer to be contacted? Phone: _____ Email: _____

Have you been part of any clubs or organizations, etc.? _____

What topics/areas of interest would you like to see at our meetings?

_____

_____

_____

_____

_____

PAID: $_____

Annual Dues are $30.00 Please make check payable to the
Sterling Women's Club, P. O. Box 1055, Sterling, MA 01564