

AAUW – Charlotte	e Area Branch - Membe	ersnip Form	*Date**	
NOTE: Items with (*) are	required.			
*Last Name	*First Name		MI Ni	ckname
*Address1				
Address2				
*City		*State	*Zip	code
*Email	_			
*Phone (cell) [for text alerts]	F	hone (other)		
New Members Please Cor	mplete.			
*College/University & Location		* Degr	I TIAGRAD XI MISIOR I	
**Date conferred or expected.				
Occupation/ Work Exper	ience:			
Hobbies/ Interests you w	ant to share:			
Issues most important to	you today:			

## **CHECK MEMBERSHIP TYPE**

Please make check payable to: **AAUW-Charlotte Branch** Remember: All of the national dues are tax deductible.

\$98.00 **New Member** New Member with discount \$62.00 **Branch Member** \$98.00

,	TOTAL ENCLOSED \$			
	Student without Member College			
	E-Student with Member College			
	Life Member	\$26.00		

Mail completed form and check to