

New and Returning Member Form: Membership period for new members is one year from join date.

<u>Please mail or give this completed form</u> and your check payable to: AAUW Foothills of El Dorado or just AAUW to Marianne Rorden, Treasurer, PO Box 224, Garden Valley, CA 95633

National AAUW*	\$74.00		
California AAUW	\$30.00 F	Preferred meeting time week day afternoor	n
Foothills of EDC Branch		Saturday morning Saturday afternoon	
		e as a charitable contribution for federal income tax punal rate for NEW members joining "on the spot" at an A	
		es (\$20.00) do not meet member expenses. Any ort branch activities. Thank you!	y amount contributed
Are you a Paid Life Memb	er? Yes No	Are you an Honorary Life Member?	Yes No
=	a AAŪW dues (if your p	e branch and Foothills of El Dorado is not your primar orimary branch is within California):	ry branch, you do not need
Last Name		First Name	
Address			
		Cell phone	
E-Mail Address			
College or University from	which you graduat	ted	
Year of Graduation	Degree Received	l Major	
For Interest Groups: Boo	ks groups, great d	liscussions, play reading, out-to-lunch bunc	h, bridge, etc.
See branch website: http:/	<u>//eldorado-ca.aauv</u>	w.net or email: aauwfoothillsedc@gmail.co	<u>om</u>
YES! I'd like to get involv	red! (mark one or	more)	
Tech Trek Scholarships Programs Membership Hospitality Board Leadership Fundraising Carpooling Phone Tree			
Public Policy			