

AAUW MARCO ISLAND BRANCH
MEMBERSHIP & FRIEND APPLICATION

(PLEASE PRINT)

NAME: _____ SPOUSE: _____

LOCAL ADDRESS: _____ CONDO/APT: _____

STATE/ZIP: _____ LOCAL TELEPHONE: _____

ALTERNATE ADDRESS: _____

EMAIL ADDRESS: _____

BIRTH MONTH _____ DAY _____

ANNUAL DUES ARE:

_____ Marco Island - \$98.00 (includes National & State/Florida).

_____ Dual - \$26.00* (Primary Branch _____, AAUW # _____)

_____ Life - \$26.00* (Primary Branch _____, AAUW # _____)

_____ Branch Friend - \$20.00 (no Associate of Arts or equivalent, or higher degree)

*If your primary branch is in Florida, pay only Marco Island Branch dues of \$14.00.

EDUCATION INFORMATION:

Undergraduate Degree: _____ Major/Concentration _____

School _____ Graduation Date (mm/dd/yyyy) _____

Graduate Degree: _____ Major/Concentration _____

School _____ Graduation Date (mm/dd/yyyy) _____

Post Graduate Degree: _____ Major/Concentration _____

School _____ Graduation Date (mm/dd/yyyy) _____

Release: AAUW - Marco Island Branch may use my name and photograph in branch publications and on its Website, <https://marcoisland-fl.aauw.net>.

Signature: _____ **Date:** _____

NAME BADGE: The cost of an AAUW name badge is \$14.00 and can be added to the amount of your dues. We will order it for you. Please print your name below as you wish it to appear on the badge:

Mail this Membership Application Form with your check payable to AAUW-MARCO ISLAND to:

AAUW-MARCO ISLAND
P.O. BOX 841
MARCO ISLAND, FL 34146