



Application for Membership

Name _____

Address _____

Email Address _____

Phone _____ Cell _____

Birthday _____ Name of Spouse _____
(if applicable)

Applicant's Signature _____

Date _____

Sponsor's Signature _____

Sponsor's Signature _____

All women are eligible for membership.

Applications for admission to membership must be presented to the Board for approval and must be signed by two sponsors who have been members of the Crete Woman's Club for a minimum of one year and have sponsored not more than 1 other prospective member within the Club year. A majority vote of the Board shall elect to membership. The application must be accompanied by an initiation fee of \$25.00. Dues are prorated and should be paid within thirty days of notification of acceptance for membership.

We would like to know more about you. The information you provide may be shared with the club members at your installation meeting. Thank you.

Special interests, talents and skills --

Business or professional experience --

Involvement in other organizations, as a member and in leadership roles –

The Crete Woman's Club provides and encourages many opportunities for involvement by its members. We require participation in the major fundraisers* every year, and are confident you will enjoy other service, social and charitable activities.

Please check your areas of interest:

- | | |
|---|---|
| <input type="checkbox"/> The Arts | <input type="checkbox"/> Newsletter |
| <input type="checkbox"/> Book Club | <input type="checkbox"/> Food Pantry |
| <input type="checkbox"/> *Garden Walk | <input type="checkbox"/> Monthly Programs |
| <input type="checkbox"/> *Cookie Walk | <input type="checkbox"/> Needlework Group |
| <input type="checkbox"/> Bridge Club | <input type="checkbox"/> Hostess |
| <input type="checkbox"/> Pinochle Club | <input type="checkbox"/> Public Affairs |
| <input type="checkbox"/> Community Health & Welfare | <input type="checkbox"/> Publicity |
| <input type="checkbox"/> Conservation | <input type="checkbox"/> Legislation |
| <input type="checkbox"/> Education/Scholarships | <input type="checkbox"/> Sunshine Committee |
| <input type="checkbox"/> "Great Decisions" | <input type="checkbox"/> Spring Luncheon |
| <input type="checkbox"/> International Affairs | <input type="checkbox"/> Christmas Luncheon |
| <input type="checkbox"/> Membership Committee | <input type="checkbox"/> Telephone Tree |
| <input type="checkbox"/> Assist the Treasurer | <input type="checkbox"/> Web Page |
| <input type="checkbox"/> Secretarial Assistance | <input type="checkbox"/> Craft Group |
| <input type="checkbox"/> Food Group | |

Please mail completed application to:

Membership Chair
Crete Woman's Club
P.O. Box 104
Crete, IL 60417

Or give it to one of your sponsors. Thank You!