

**Application for Membership  
The Catholic Woman's Club**

**Please complete all information:**

|                         |                            |                         |                      |
|-------------------------|----------------------------|-------------------------|----------------------|
| _____                   |                            | _____                   |                      |
| <b>Date</b>             |                            | <b>Parish</b>           |                      |
| _____                   |                            | _____                   |                      |
| <b>Last Name</b>        |                            | <b>First Name</b>       | <b>Middle/Maiden</b> |
| Miss _____              | Mrs. _____                 | _____                   |                      |
| Ms. _____               | <b>Husband's Full Name</b> |                         |                      |
| _____                   |                            | _____                   |                      |
| <b>Full Address</b>     |                            | <b>Birthday: Mo/Day</b> |                      |
| _____                   |                            | _____                   | _____                |
| <b>City</b>             |                            | <b>State</b>            | <b>Zip</b>           |
| _____                   |                            | _____                   |                      |
| <b>Telephone Number</b> |                            | <b>E-Mail</b>           |                      |

**Special Interests, Activities, Clubs, Hobbies, Volunteer Work, Card Groups, etc:**

\_\_\_\_\_

\_\_\_\_\_

**Sponsored By:** \_\_\_\_\_  
(If no CWC Member is sponsor – must list Parish Office Phone Number for verification of status)

**Signature of prospective member:** \_\_\_\_\_

**There is no initiation fee. Yearly dues: \$40.00 – June 1<sup>st</sup> thru May 31<sup>st</sup>**  
**Please include your check (made out to CWC) with this application.**  
**A candidate for Active Membership shall be a practicing Catholic woman at least twenty-one (21) years of age, who has been sponsored by an Active Member. Application for membership shall be submitted to the Membership Chairman and must be voted on at the Board of Directors Meeting. A majority vote of those present and voting at this meeting shall constitute an election of the new Member to the Club.**

**Presented to the Board by:** \_\_\_\_\_  
**Date Approved by Board** \_\_\_\_\_

**Mail to: Catholic Woman's Club  
P.O. Box 17635  
Richmond, VA 23226**