



# GFWC Space Coast Woman's Club, Inc.



## Membership Application

Name: \_\_\_\_\_  
 Nickname: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Preferred Phone #: \_\_\_\_\_  Cell  Home  
 Email Address: \_\_\_\_\_  
 Birthday (MM/DD): \_\_\_\_\_ # of years as GFWC member: \_\_\_\_\_  
 Spouse/Partner Name: \_\_\_\_\_  
 Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

### Areas of interest: (check all that apply)

- Art & Culture     Civic Engagement     Education & Libraries     GFWC FL President's Project  
 Environment     Health & Wellness     Membership     Fundraising  
 Legislation/Public Policy     Publicity/Social Media/Newsletter     Domestic Violence Awareness

**Other club/organizational memberships:**  
 \_\_\_\_\_  
 \_\_\_\_\_

**Do you have any special skills or education that you wish to share?**  
 \_\_\_\_\_  
 \_\_\_\_\_

I understand that by signing below and paying **\$63.00** (\$23.00 GFWC/GFWC dues + \$30.00 club dues + \$10.00 name-tag fee), I am a member of GFWC Space Coast Woman's Club, Inc., pending approval by the club's Board of Directors. As a member I agree to attend membership meetings, participate in club activities, and support the club through volunteer service and with monetary and/or in-kind donations.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

**Email Application to:**  
 gfwcspacecoast@gmail.org  
**Payment can be made by:**  
**Zelle:** susan.musil@mac.com **-OR-**  
**Mail check** made out to *GFWC Space Coast Woman's Club* to:  
 8101 Stonecrest Drive; Viera, FL 32940

**Nametag Information**  
**Name you would like on your nametag:**  
 \_\_\_\_\_  
 Per our club's Standing Rules, members are required to wear their Club name badge at official club events and while participating in volunteer service on behalf of the club.

### Board Use Only

1st Meeting: \_\_\_\_\_ Other event: \_\_\_\_\_ Orientation: \_\_\_\_\_ Board Review: \_\_\_\_\_

- Welcome letter sent     Name tag ordered