



**GREATER MUSKEGON
WOMAN'S CLUB**
continuing the legacy

Name: _____ Date: _____

Home Address: _____

City: _____ Zip: _____

Preferred Phone: _____ Email: _____

Spouse's Name: _____ # Children: _____ # Grandchildren: _____

Birthday (Month and date): _____

Other Clubs/Organizations to which you belong: _____

Hobbies and Interests: _____

How did you hear about the GMWC? _____

Please tell us about yourself (information will be used in our newsletter to introduce you to our members):

I wish to become a member of GMWC and agree to pay annual dues of \$100 payable to Greater Muskegon Woman's Club. I also agree to abide by the bylaws and support the mission of the club.

Applicant's Signature: _____

Please return this application with a check for your initial dues to:

Greater Muskegon Woman's Club
280 W. Webster Ave, Muskegon, MI 49440