

## AAUW VERO BEACH BRANCH APPLICATION: 2017-18

Check one:  Renewal  New Member  Dual Member  National Member  Transfer

Section 1. Contact Information and Education. PLEASE WRITE ONLY CHANGES IN SECTIONS 1 AND 2 AND GO ON TO SECTION 3.

MY INFORMATION IS CORRECT IN THE 2016-17 HANDBOOK. NO CHANGES.

NAME: \_\_\_\_\_ Circle Preferred Title: DR MRS MS  
Last First

ADDRESS: \_\_\_\_\_  
Street/PO Box

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

PHONE: \_\_\_\_\_  
Home Cell

E-MAIL: \_\_\_\_\_

**EDUCATION** (Circle appropriate degrees)

AA/BA/BS/RN \_\_\_\_\_  
School Major Year

MA/MS/MEd \_\_\_\_\_  
School Major Year

PhD/MD/EdD/ \_\_\_\_\_  
Other School Major Year

Section 2. Are you a Seasonal Member?

Yes, Months out-of-town \_\_\_\_\_ to \_\_\_\_\_ No, I live in Vero Beach all year  
Out-of-town address

Phone(s) \_\_\_\_\_

Section 3. Dues and Donations

Renewal: National \$49, State \$12, Vero Beach Branch \$25, mailing fee \$1 = Total \$87.00 (\$71 tax deductible)

New Member Sign-Up-at-Meeting Discount: \$24.50 + \$6 + \$25 + \$1 = Total \$56.50 (\$47.50 tax deductible)

Life Member or Dual Member other branch: \_\_\_\_\_ (No Nat'l dues) = \$38 (\$25 tax deductible)

Member for 50+ Years (No National/State dues) = \$26 (\$25 tax deductible)

Dues for Membership..... \$ \_\_\_\_\_  
 Donation (tax deductible)  
     IRSC Scholarships..... \$ \_\_\_\_\_  
     Local Program Fund..... \$ \_\_\_\_\_  
     AAUW 9110 Fund..... \$ \_\_\_\_\_  
 Add \$5.00 if you want Hotline mailed..... \$ \_\_\_\_\_

**TOTAL Due and Enclosed..... \$ \_\_\_\_\_**

**Mail check payable to AAUW Vero Beach Branch and mail completed 2 page application to:**  
 AAUW Vero Beach Vero  
 PO Box 2143  
 Beach, FL 32961

Or complete your information and pay online.

Name \_\_\_\_\_

Phone \_\_\_\_\_

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E-mail address \_\_\_\_\_

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**Section 4. Your Interests****We form friendships and nourish our minds in our Study/Interest groups. Which of these member-only groups would you like to join now?**

- |   |  |
|---|--|
| <input type="checkbox"/> Bridge ( ___ Duplicate or ___ Party) | <input type="checkbox"/> Public Policy           |
| <input type="checkbox"/> Creative Writing                     | <input type="checkbox"/> Lunch Bunch             |
| <input type="checkbox"/> Reading Group                        | <input type="checkbox"/> International Relations |

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**We help our community with our volunteering. Which of our outreach programs would you like to join now or receive more information on?**

- |   |   |
|---|---|
| <input type="checkbox"/> Fundraising  | <input type="checkbox"/> Adult Literacy Tutor   |
| <input type="checkbox"/> Youth Mentor/Tutor   | <input type="checkbox"/> Members Helping Members                                      |
| <input type="checkbox"/> Communications   | <input type="checkbox"/> STEM, Tech Trek, Environmental Learning Center, Science Fair |
| <input type="checkbox"/> Guardian Ad Litem Program: <i>volunteer advocates for children in need in courts and schools</i> |   |

**Our quality programs attract the community. Which of our programs would you like to support?**

- Hospitality - refreshment at meetings / programs / Book Breakfasts
- Committee work for Book-Author Luncheon
- Join the board or chair a committee

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**We know that our oldest member is 100 and our youngest member is 20-something, but we would like to better understand our age demographics. Please check your age range:**

Under 65   
  65-74   
  75-84   
  Over 85   
 Thank you!

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**PLEASE tell us how you heard about AAUW:**

Member Referral Name: \_\_\_\_\_ Newspaper: \_\_\_\_\_

Other (event, brochure etc.) – please be specific:  
\_\_\_\_\_