



Membership Application

2025-26

(GENERAL MEETINGS: Sept.— May)

Apopka WomansClub.org

Select One NEW APPLICANT RENEWAL (*W/O CHANGES*) RENEWAL (*WITH CHANGES*)
 *** Specify change(s) with asterisks

PLEASE PRINT CLEARLY Date: _____

PERSONAL INFO.

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone (*Home*): _____ Cell/Other: _____

Email: _____

Birthday: _____ Anniversary: _____ Spouse's Name: _____

SPONSOR (*Member's Name*): _____

List your top three (3) skills: _____

List special interest(s): _____

COMMITTEES

REFRESHMENT COMMITTEES
(Please indicate your 1st and 2nd choices)

September October November January
 February March April May

COMMUNITY SERVICE PROJECTS
(Please indicate your 1st and 2nd choices)

Arts and Culture Civic Engagement and Outreach Education and Libraries
 Environment Health and Wellness

OTHER COMMITTEES
(Please indicate additional committee(s) you would like to serve)

Budget (*Gen.*) Foliage Festival Membership Newsletter Phone Tree
 Reporting Social Special Events Ways & Means Yearbook

MEMBERSHIP

Please indicate desired level below, then return application with dues by **May meeting**. Make check payable to:
GFWC Apopka Woman's Club

Active Member **\$35.00** Associate Member (*Non-Voting*) **\$40.00**

GOLDEN MEMBERSHIP – Annual Membership from July 1st — June 30th for anyone whose age, plus years of Club membership equals 100 years; with voting privileges.

Active Golden Member **\$26.25** Associate Golden Member (*Non-Voting*) **\$30.00**

NEWSLETTER **NAME BADGE**

Printed Version (*via mail*) **\$10.00** Full Digital Color (*Magnetic Back*) **\$10.00**

MAIL TO:

Charlotte White
 1173 Deer Lake Circle
 Apopka, FL 32712
charlottewhite21@gmail.com

OFFICE USE ONLY:

Date Rec'd. _____
 Check # _____
 Amount \$ _____
 Board Approved? YES NO
 Date of Approval _____