

**WELCOME TO AAUW ASHLAND**  
**MEMBERSHIP APPLICATION**



Please mail membership form and check to:  
**AAUW Ashland, 2305 Ashland St, Ste 104-406, Ashland OR 97520**

Questions? Contact Membership Chair Susan Jain, susanjain.china@gmail.com

**NEW Membership Application**     **RENEWAL Membership Application**

<b>PLEASE FILL OUT ALL INFORMATION COMPLETELY.</b>	Today's Date:
<b>ANNUAL DUES AND CONTRIBUTIONS</b> Please make one check to AAUW	
<b>Basic Membership \$123</b> (Dues breakdown: National \$72 State \$16 Branch \$35)	\$
<b>Dual Branch Member \$35</b> (Payable to the Ashland Branch by members of another branch)	\$
Dual members, what is your primary branch? <i>(National and state dues paid directly to primary [original] branch)</i>	
<b>Helping Hand Fund</b> (dues assistance) Please note that if you need assistance with registration fees, contact the Membership Chair listed above.	\$
<b>National AAUW <u>GREATEST NEEDS</u> Fund Donation.</b>	\$
<input type="checkbox"/> Check # _____ Enclosed	<b>TOTAL TO AAUW:</b> \$
<small><i>The tax-deductible portion of your \$123 dues is \$112. AAUW National, State and the Ashland Branch are all 501c3 non-profit organizations. For IRS-related issues, refer to the IRS website for charities and nonprofits (<a href="http://www.irs.gov/Charities-&amp;-Non-Profits">www.irs.gov/Charities-&amp;-Non-Profits</a>) or call the IRS nonprofit office at 877.829.5500.</i></small>	

Your Personal Information		TYPE OR PRINT CLEARLY (For Renewals, use to note any changes)			
Last Name:		First Name:		Birthday: (month & day)	
Primary Phone:		E-mail address:		Partner's name: (optional)	
Street/Mailing Address:		City:		State:	Zip:
Your Education					
1st College/University:		Degree/Date	Major:		State:
2nd College/University:		Degree/Date	Major:		State:
3rd College/University:		Degree/Date	Major:		State:

**THANK YOU.**  
**PLEASE COMPLETE YOUR INTERESTS SURVEY ON PAGE 2.**

# AAUW ASHLAND BRANCH INTEREST SURVEY

Let us know how you'd like to be involved! We welcome new ideas!

First / Last Name:	Primary phone:	E-mail address:
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## BRANCH LEADERSHIP

<input type="checkbox"/> <b>Serve in Leadership / Management Position as an Officer</b>	<input type="checkbox"/> <b>Serve as a Board Member</b>
<input type="checkbox"/> Co-President	<input type="checkbox"/> Chair a committee
<input type="checkbox"/> Financial Officer	<input type="checkbox"/> Membership Chair
<input type="checkbox"/> Dues Treasurer	<input type="checkbox"/> Communication Chair
<input type="checkbox"/> Recording Secretary	<input type="checkbox"/> Program Chair
<input type="checkbox"/> Parliamentarian	<input type="checkbox"/> Fundraising Chair
<input type="checkbox"/> Member-at-Large	<input type="checkbox"/> Public Policy Chair
	<input type="checkbox"/> Scholarships Chair
	<input type="checkbox"/> State / Regional Position

## SHARE YOUR SKILLS AND TALENTS ON A COMMITTEE OR TEAM

<input type="checkbox"/> Accounting / Finance / Budget
<input type="checkbox"/> Branch Directory / Database Maintenance
<input type="checkbox"/> Celebration of Scholars Event Mentoring Scholars for the Celebration Event
<input type="checkbox"/> Coffee and Refreshments / Table Decorations
<input type="checkbox"/> Communications Team: Newsletter   Website   Facebook   Editing
<input type="checkbox"/> Computer Tech Skills
<input type="checkbox"/> Diversity, Equity, and Inclusion Team
<input type="checkbox"/> Fundraising
<input type="checkbox"/> Greet at Meetings
<input type="checkbox"/> Holiday Party / Event Planning / Luncheon
<input type="checkbox"/> Interest Group Coordinator
<input type="checkbox"/> Membership Team / New Member Friend
<input type="checkbox"/> Photography / Archivist
<input type="checkbox"/> Program Planning Committee
<input type="checkbox"/> Public Policy Team
<input type="checkbox"/> Publicity / Promotions: Graphic Design   Desktop Publishing
<input type="checkbox"/> Scholarship Committee
<input type="checkbox"/> Secretarial Help
<input type="checkbox"/> Social Committee
<input type="checkbox"/> Upscale Sale or other external fundraising events

## INTEREST GROUP LEADER (IDEAS)

<input type="checkbox"/> Bridge
<input type="checkbox"/> Cooking
<input type="checkbox"/> Dinner Club /Happy Hour
<input type="checkbox"/> Fiction Book Club
<input type="checkbox"/> Friendship Circles
<input type="checkbox"/> Knitting / Crochet / Needlepoint / Quilting
<input type="checkbox"/> PROPOSE A NEW INTEREST GROUP
<input type="checkbox"/> Live Theatre
<input type="checkbox"/> Movies: Musicals / Classics
<input type="checkbox"/> Mystery Book Club
<input type="checkbox"/> Non-Fiction Book Club
<input type="checkbox"/> Opera
<input type="checkbox"/> Walking

## YOUR IDEAS