

THE WOMEN'S COLLEGE CLUB OF PRINCETON

Enriching and Empowering Women Since 1916

New Membership Application

Date: _____

Name _____

Address _____

City _____ State _____ Zip _____

Home Tel _____ Cell _____

E-Mail _____

College(s) _____

Tell us about yourself: Career, Memberships, Hobbies, Interests etc.

How did you hear about us? _____

We encourage our members to participate in as many activities as possible:

Please tell us what interests you:

Monthly Meetings _____ Book Club _____ Programs _____

Trips _____ Walking Group _____ Operas _____

Lunch Outings _____ Membership _____ Movies _____

Volunteering _____ Others _____

THE WOMEN'S COLLEGE CLUB OF PRINCETON

Name: _____

ANNUAL Dues \$ 75.00

Scholarship Fund \$ _____

Total \$ _____

Please send your application and check to:

Women's College Club of Princeton

c/o Marlene Gordon, Treasurer

39 Slayback Drive

Princeton Junction, NJ 08550

The Women's College Club of Princeton is a 501(c)(3) organization, EIN:21 - 6016688. You are encouraged to make an additional contribution to the Scholarship Fund which is tax deductible to the fullest extent provided by law.

We look forward to sharing an interesting and exciting year with you.

WWW.WCCPNJ.ORG

WCCPNJ@GMAIL.COM