



**South Haven Affiliate New Member Application FY 2025-2026**

Name: \_\_\_\_\_ Date/Event: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**College/University (no abbreviations)**      **State**      **Degree**   **Date**      **Year Graduated**


**Current Employer & Position** (if applicable) \_\_\_\_\_

**Recruiter** (if applicable): \_\_\_\_\_

**Dues - Fiscal Year 2025/2026** (make check payable to AAUW)

Annual Dues (National - \$74.00, State - \$15.00, Affiliate - \$14.00): **\$103.00** \_\_\_\_\_ (through June 30, 2026)

**Note:** (Promotional membership rates are available from time to time for first year Members)

Please check your interests:

<input type="checkbox"/> Book Sale Committee/Annual Book Sale	<input type="checkbox"/> Scholarship Committee
<input type="checkbox"/> Public Policy Committee	<input type="checkbox"/> Blessings in a Backpack
<input type="checkbox"/> Rapid Responders	<input type="checkbox"/> Book Group (afternoon/evenings)
<input type="checkbox"/> Diversity, Equity, Inclusion	<input type="checkbox"/> Bridge group
<input type="checkbox"/> Women's History Group	<input type="checkbox"/> Gourmet Dinner Group
<input type="checkbox"/> Open Door Dinners	<input type="checkbox"/> Golf
<input type="checkbox"/> Fundraising	<input type="checkbox"/> Domestic Violence Awareness

Special Interests, skills, and abilities you would like to share:

Return this form with a check for \$103 to: AAUW SH Treasurer P>O> Box 343, South Haven, MI 49090