



#### 4. Chapter Dues (alphabetical order by state):

If members reside in different areas, the appropriate chapter dues must be checked below and paid

- |   |  |
|---|--|
| <input type="checkbox"/> NO LOCAL CHAPTER/NO AFFILIATION WITH A CHAPTER-<br>\$0.00 x ___ member(s) = \$____.00  | <input type="checkbox"/> Albuquerque \$25.00 x ___ member(s) = \$____.00   |
| <input type="checkbox"/> California-<br>Santa Barbara \$50.00 x ___ member(s) = \$____.00   | <input type="checkbox"/> New Jersey -<br>Northern New Jersey \$20.00 x ___ member(s) = \$____.00   |
| <input type="checkbox"/> District of Columbia-<br>Washington, D.C \$40.00 x ___ member(s) = \$____.00   | <input type="checkbox"/> New York-<br>Rochester \$20.00 x ___ member(s) = \$____.00<br>Westchester/Fairfield \$40.00 x ___ member(s) = \$____.00   |
| <input type="checkbox"/> Florida-<br>South Florida \$30.00 x ___ member(s) = \$____.00  | <input type="checkbox"/> Ohio-<br>Toledo \$35.00 x ___ member(s) = \$____.00   |
| <input type="checkbox"/> Iowa-<br>Des Moines \$30.00 x ___ member(s) = \$____.00  | <input type="checkbox"/> Oklahoma-<br><input type="checkbox"/> Oklahoma City \$20.00 x ___ member(s) = \$____.00<br><input type="checkbox"/> Tulsa \$20.00 x ___ member(s) = \$____.00   |
| <input type="checkbox"/> Illinois-<br><input type="checkbox"/> Bloomington/Normal \$25.00 x ___ member(s) = \$____.00<br><input type="checkbox"/> Springfield \$25.00 x ___ member(s) = \$____.00 | <input type="checkbox"/> South Carolina-<br>Greenville \$25.00 x ___ member(s) = \$____.00   |
| <input type="checkbox"/> Indiana-<br>Lafayette IN \$10.00 x ___ member(s) = \$____.00   | <input type="checkbox"/> Texas-<br><input type="checkbox"/> Austin \$35.00 x ___ member(s) = \$____.00<br><input type="checkbox"/> Dallas \$45.00 x ___ member(s) = \$____.00<br><input type="checkbox"/> Lubbock \$0.00 x ___ member(s) = \$____.00<br><input type="checkbox"/> San Antonio \$25.00 x ___ member(s) = \$____.00 |
| <input type="checkbox"/> Kansas-<br>Topeka \$15.00 x ___ member(s) = \$____.00  | <input type="checkbox"/> Washington-<br>Seattle \$60.00 x ___ member(s) = \$____.00  |
| <input type="checkbox"/> Michigan-<br>Detroit \$40.00 x ___ member(s) = \$____.00   | <input type="checkbox"/> Wisconsin-<br><input type="checkbox"/> Madison \$30.00 x ___ member(s) = \$____.00<br><input type="checkbox"/> SE Wisconsin \$25.00 x ___ member(s) = \$____.00   |
| <input type="checkbox"/> Missouri-<br><input type="checkbox"/> Kansas City \$30.00 x ___ member(s) = \$____.00<br><input type="checkbox"/> Springfield \$20.00 x ___ member(s) = \$____.00        |  |
| <input type="checkbox"/> New Mexico-  |  |

4. CHAPTER DUES SUBTOTAL \$ \_\_\_\_\_ .00

#### PAYMENT OPTIONS:

- Check* made payable to AWC  
 *Credit Card*

Choose from the following:

- Visa*    *MasterCard*    *American Express*

#### Credit Card Information:

Credit Card #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Security Code #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ / \_\_\_\_\_

Name on Card: \_\_\_\_\_

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

Signature: \_\_\_\_\_

#### TOTAL DUE:

1. National Membership Dues	\$ _____ .00
2. National Application Fee	\$ _____ .00
3. Chapter Application Fee(s)	\$ _____ .00
4. Chapter Dues	\$ _____ .00
<b>TOTAL =</b>	<b>\$ _____ .00</b>

- I authorize the above amount to be charged to my credit card.

\*AWC Memberships are non-refundable\*

Fax or Mail payments to:

AWC National Headquarters • 3337 Duke Street • Alexandria, VA 22314  
Phone: (703) 370-7436 • Fax: (703) 342-4311 • [members@womcom.org](mailto:members@womcom.org) • [www.womcom.org](http://www.womcom.org)

Revised 01/2010

Primary Contact Person as stated in "Corporate Membership Guidelines" Section:  
*Does not have to be a member*

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Provide BOTH a *PRIMARY* Address as well as an *ALTERNATE* Address:

PRIMARY:  Business  Home  Permanent

ALTERNATE:  Business  Home  Permanent

\_\_\_\_\_  
Address 1

\_\_\_\_\_  
Address 1

\_\_\_\_\_  
Address 2

\_\_\_\_\_  
Address 2

\_\_\_\_\_  
City State Zip Code (5 digits Only)

\_\_\_\_\_  
City State Zip Code (5 digits Only)

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

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

( ) -  
\_\_\_\_\_  
Phone # including area code

( ) -  
\_\_\_\_\_  
Phone # including area code

Member #1:

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Provide BOTH a *PRIMARY* Address as well as an *ALTERNATE* Address:

PRIMARY:  Business  Home  Permanent

ALTERNATE:  Business  Home  Permanent

\_\_\_\_\_  
Address 1

\_\_\_\_\_  
Address 1

\_\_\_\_\_  
Address 2

\_\_\_\_\_  
Address 2

\_\_\_\_\_  
City State Zip Code (5 digits Only)

\_\_\_\_\_  
City State Zip Code (5 digits Only)

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

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

( ) -  
\_\_\_\_\_  
Phone # including area code

( ) -  
\_\_\_\_\_  
Phone # including area code

Member #2:

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Provide BOTH a *PRIMARY* Address as well as an *ALTERNATE* Address:

PRIMARY:  Business  Home  Permanent

ALTERNATE:  Business  Home  Permanent

\_\_\_\_\_  
Address 1

\_\_\_\_\_  
Address 1

\_\_\_\_\_  
Address 2

\_\_\_\_\_  
Address 2

\_\_\_\_\_  
City State Zip Code (5 digits Only)

\_\_\_\_\_  
City State Zip Code (5 digits Only)

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

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

( ) -  
\_\_\_\_\_  
Phone # including area code

( ) -  
\_\_\_\_\_  
Phone # including area code

Member #3:

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Provide BOTH a *PRIMARY* Address as well as an *ALTERNATE* Address:

PRIMARY:  Business  Home  Permanent

ALTERNATE:  Business  Home  Permanent

\_\_\_\_\_  
Address 1

\_\_\_\_\_  
Address 1

\_\_\_\_\_  
Address 2

\_\_\_\_\_  
Address 2

\_\_\_\_\_  
City State Zip Code (5 digits Only)

\_\_\_\_\_  
City State Zip Code (5 digits Only)

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E-mail

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E-mail

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\_\_\_\_\_  
Phone # including area code

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\_\_\_\_\_  
Phone # including area code

Member #4 (Must be Corporate Signature Member):

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Provide BOTH a *PRIMARY* Address as well as an *ALTERNATE* Address:

PRIMARY:  Business  Home  Permanent

ALTERNATE:  Business  Home  Permanent

\_\_\_\_\_  
Address 1

\_\_\_\_\_  
Address 1

\_\_\_\_\_  
Address 2

\_\_\_\_\_  
Address 2

\_\_\_\_\_  
City State Zip Code (5 digits Only)

\_\_\_\_\_  
City State Zip Code (5 digits Only)

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E-mail

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

( ) -  
\_\_\_\_\_  
Phone # including area code

( ) -  
\_\_\_\_\_  
Phone # including area code

Member #5 (Must be Corporate Signature Membership):

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Provide BOTH a *PRIMARY* Address as well as an *ALTERNATE* Address:

PRIMARY:  Business  Home  Permanent

ALTERNATE:  Business  Home  Permanent

\_\_\_\_\_  
Address 1

\_\_\_\_\_  
Address 1

\_\_\_\_\_  
Address 2

\_\_\_\_\_  
Address 2

\_\_\_\_\_  
City State Zip Code (5 digits Only)

\_\_\_\_\_  
City State Zip Code (5 digits Only)

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

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

( ) -  
\_\_\_\_\_  
Phone # including area code

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\_\_\_\_\_  
Phone # including area code