

membership application

ANNUAL MEMBERSHIP DUES: \$100

Mail to: Women Empowering Women
5 Patterson Lake Drive
Dickinson, ND 58601

or email: info@wewnetwork.org

GENERAL INFORMATION

Name: _____

Address: _____

Phone Number: _____

Email Address: _____

Type of Membership: Contributor Student

INTEREST STATEMENT

DEMOGRAPHIC INFORMATION *(optional)*

Age: 18-30 31-40 41-50 51-60 61-70 70+

Race: White Black Hispanic Native
 Asian/Pacific Islander/Indian Subcontinent
 two or more races prefer not to state

Occupation: _____

Education Level: some high school high school degree some college
 college degree graduate degree

Marital Status: single married divorced widowed prefer not to state

Children: yes no # of children: ___ male ___ female Still at home? ___

DATE RECEIVED: ___/___/___

Women
EMPOWERING
Women

Where women become the best version of themselves

