

GFWC Woman's Club of Palatka, Inc. P.O. Box 282, Palatka, FL 32178

New Member Application



(Application Should Be Completed In Capital Letters and Black Ink) Date				
Name:				
Last		First	Preferred	d
Birth Month	Day	Spouse's Name	e	
Address (In Full)				
Home Phone Cell				
Email				
Why have you chos	sen to apply fo	or membership in GF\	WC Woman's Club	o of Palatka?
	n's Club of Pal		ganization. Please	share your talents and interests
☐ Arts and Culture☐ Civic Engageme			ion and Libraries	☐ Health & Wellness
If you are a transfer member, please provide the club name, city and state from which you are transferring				
Annual Dues: Active Members \$60.00 Associate Member. \$100.00 All new members one time initiation fee \$15.00				
	-		s Club Of Palatka	
To Be Completed B				
Sponsor's Name				
How long have you	known the pr	ospective member?_		
Events Attended				
Comments				