**GFWC Women’s Civic League of Cheyenne**

**(WCLC)**

**Membership Application**

Candidates for membership must have resided in the Cheyenne area since the preceding August of the year of application. A candidate must be sponsored/endorsed into membership by two GFWC WCLC members who are in good standing. A total of $50 for annual dues must accompany this application as well as an additional $12.50 if you would like to order a name badge (please make checks payable to WCLC). Membership becomes effective once the completed application and fees have been submitted.

Membership information is available on our website: https://www.womenscivicleaguecheyenne.org/membership

The fiscal year as approved by IRS is July 1 through June 30.

**Please print legibly or type the requested information.**

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  | Birthday (Month/Day): |  |
| Address: |  | Zip Code: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Telephone numbers: | | Cell: |  | Home: |  |
| E-Mail address: |  | | | | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Preferred method of contact: | Text |  | Cell |  | Home Ph |  | E-Mail |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Spouse’s name for yearbook only: |  | | |
| If ordering, how do you want your name badge to read? | | |  |
| Please list your hobbies and/or skills. | |  | |

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| --- |
| Please check any of the following WCLC community service programs in which you have an interest: |

Arts & Culture\_\_\_\_ Environment\_\_\_\_ Education & Libraries\_\_\_\_ Health & Wellness\_\_\_\_

Civic Engagement & Outreach\_\_\_\_

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Have you ever been a member of another club affiliated with the General Federation of Women’s Clubs?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Yes: |  | When and where? |  | Name of Club: |  |
| No: |  |

Media Release: Do you give permission for your name and/or image to be included in social/public media?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Yes: |  |  | No: |  |

I have read and understand the obligations of GFWC WCLC and wish to apply for membership at this time.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Sponsor signature: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Endorser signature: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Please send the completed application and appropriate fees to:

Membership Chairman

GFWC Women’s Civic League of Cheyenne

P. O. Box 4062, Cheyenne WY 82003