

1. NAME \_\_\_\_\_ PHONE # \_\_\_\_\_  
 MAILING ADDRESS \_\_\_\_\_  
 \_\_\_\_\_ EMAIL \_\_\_\_\_  
**CHECK ONE:** NEW Member  | RETURNING Member  | LIFE Member

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2. NAME \_\_\_\_\_ PHONE # \_\_\_\_\_  
 MAILING ADDRESS \_\_\_\_\_  
 \_\_\_\_\_ EMAIL \_\_\_\_\_  
**CHECK ONE:** NEW Member  | RETURNING Member  | LIFE Member

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3. NAME \_\_\_\_\_ PHONE # \_\_\_\_\_  
 MAILING ADDRESS \_\_\_\_\_  
 \_\_\_\_\_ EMAIL \_\_\_\_\_  
**CHECK ONE:** NEW Member  | RETURNING Member  | LIFE Member

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4. NAME \_\_\_\_\_ PHONE # \_\_\_\_\_  
 MAILING ADDRESS \_\_\_\_\_  
 \_\_\_\_\_ EMAIL \_\_\_\_\_  
**CHECK ONE:** NEW Member  | RETURNING Member  | LIFE Member

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5. NAME \_\_\_\_\_ PHONE # \_\_\_\_\_  
 MAILING ADDRESS \_\_\_\_\_  
 \_\_\_\_\_ EMAIL \_\_\_\_\_  
**CHECK ONE:** NEW Member  | RETURNING Member  | LIFE Member

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6. NAME \_\_\_\_\_ PHONE # \_\_\_\_\_  
 MAILING ADDRESS \_\_\_\_\_  
 \_\_\_\_\_ EMAIL \_\_\_\_\_  
**CHECK ONE:** NEW Member  | RETURNING Member  | LIFE Member

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7. NAME \_\_\_\_\_ PHONE # \_\_\_\_\_  
 MAILING ADDRESS \_\_\_\_\_  
 \_\_\_\_\_ EMAIL \_\_\_\_\_  
**CHECK ONE:** NEW Member  | RETURNING Member  | LIFE Member

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8. NAME \_\_\_\_\_ PHONE # \_\_\_\_\_  
 MAILING ADDRESS \_\_\_\_\_  
 \_\_\_\_\_ EMAIL \_\_\_\_\_  
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9. NAME \_\_\_\_\_ PHONE # \_\_\_\_\_  
 MAILING ADDRESS \_\_\_\_\_  
 \_\_\_\_\_ EMAIL \_\_\_\_\_  
**CHECK ONE:** NEW Member  | RETURNING Member  | LIFE Member

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10. NAME \_\_\_\_\_ PHONE # \_\_\_\_\_  
 MAILING ADDRESS \_\_\_\_\_  
 \_\_\_\_\_ EMAIL \_\_\_\_\_  
**CHECK ONE:** NEW Member  | RETURNING Member  | LIFE Member

**PEIWI BRANCH MEMBERSHIP 2022-2023**

Branch: \_\_\_\_\_

*Signatures of Executive:*

PRESIDENT \_\_\_\_\_ VICE-PRESIDENT \_\_\_\_\_  
 SECRETARY \_\_\_\_\_ TREASURER \_\_\_\_\_

KEEP PINK COPY OF THIS FORM FOR YOUR BRANCH RECORDS

PLEASE INDICATE HOW MANY MAILED NEWSLETTERS YOU REQUIRE EACH MONTH: \_\_\_\_\_