



# United States Women of Today

## New Member Information Sheet

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Name \_\_\_\_\_

Spouse \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

[ ] It is OK to call me at work. If so, please list the best time to call \_\_\_\_\_

Birth date \_\_\_\_\_

Wedding Anniversary \_\_\_\_\_

Children (Names, Ages, Birth dates) \_\_\_\_\_

\_\_\_\_\_

Occupation \_\_\_\_\_

### Favorites

Hobbies \_\_\_\_\_

Food \_\_\_\_\_

Color \_\_\_\_\_

Other \_\_\_\_\_

Are you active in other organizations? If so, please list:

What special interest areas do you have (specific community projects, youth, senior citizens, personal development programming, etc.)?

Other comments