

Institute for Women in Politics of Northwest Florida, Inc.

MEMBER INFORMATION

Please provide the following information for the permanent records of the Institute so that communications may reach you in a timely manner and basic biographical data may be readily available for public relations use.

Preferred form of name _____

Mailing address _____

City and zip _____

Preferred contact phone numbers _____

Preferred e-mail address _____

Education _____

Current Employment (or immediate past employment if retired)

Name of employer _____

Position title _____

Current Professional Affiliations (as applicable)*

Organization/position _____

Organization/position _____

Organization/position _____

Current Community Involvement (as applicable)*

Organization/position _____

Organization/position _____

Organization/position _____

Political Offices or Appointments (as applicable)*

Organization/position/dates _____

Organization/position/dates _____

Organization/position/dates _____

**A bio or curriculum vitae containing this information may be attached in lieu of completing this section of the application.*

My check in the amount noted below, made payable to the Institute for Women in Politics of Northwest Florida, Inc., is attached.

- \$ 100**
 \$ 50 (Special membership available to adults 18-25 or to full-time college students; proof of age or student status required)

Please return this completed form along with your dues payment to:

Institute for Women in Politics of Northwest Florida, Inc.
29 East Wright Street
Pensacola, FL 32501

Thank you! _____

For office use only

Date received _____

Acknowledgement and receipt sent _____ By e-mail By mail

Sent by _____