



Greater Richmond Branch of AAUW Membership Application

Membership types: Please chec	ck one. "Student"	"Individual"			
Student: Must be a student in good standing at an accredited school, college, university.				Click here to add your 2.5" x 2.5" photo	
Individual: Must be a graduate of a 2 or 4 year degree program at an accredited college or university.			credited	In the pop up, click the "Browse" button to locate your photo. Select your photo.	
* indicates a required field				3. Click "open". 4. Click "OK". 5. Click "X" to close	
* Date of Application:/	1				
*First name:		* Last name:	* Last name:		
*Street address:		Street address 2:			
*City:		State: VA	*Zip code	:	
* Email:		* Phone(s): H C			
Birthday(not yr):/_	Emergency	Emergency contact phone:			
* Prior member? If so, whe	Did a GRAA	Did a GRAAUW member invite you? If so, who?			
*School(s) attended and de	egree(s) earned:				
Join one of our Interest Gr	oups: Please	check any taler	nts/skills yo	u'd like to share:	
Book Group – Day —	_ Social	Media	Public	Speaking	
Book Group – Eve	_ Web S	te Mgmt	Accou	· ·	
Gourmet Group	_ Newsle			al Activism	
Lunch Bunch		ing/PR		Relations	
Evening Bridge	_ Hospita	•		nting a topic	
Cocktails n Convos —	_ Fund F	· ·		to the editor	
Other	_ Educa	ion	•	 Make a suggestion	
Make a suggestion				wake a suggestion	





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In a few words (150-300), please tell us about you: your background, your education, your profession, your family, your hobbies.

Type below:

The information above will be part of our **Member Biographies**, printed on-line in our **Members Only** section [login]. **Please include a head photo, if available.**

1. Print & Save your completed APPLICATION FORM to your computer.

2. Send your completed application to the

The APPLICATION FORM Committee
Kristin Johnson hunter022203@gmail.com
Carol Stephens carterstephens69@icloud.com
Jane Newell jane.newell@comcast.net
Suzanne Conrad suzannebconrad@aol.com