



**THE AMERICAN WOMEN'S ORGANIZATION OF GREECE**

**AWOG**

**MEMBERSHIP APPLICATION FOR YEAR 2021**

Last name \_\_\_\_\_ First Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Cell \_\_\_\_\_ e-mail \_\_\_\_\_

Place of Birth \_\_\_\_\_ Birthday and Month \_\_\_\_\_ **for Bulletin (optional)**

Occupation \_\_\_\_\_ Would you donate blood \_\_\_\_\_ blood type \_\_\_\_\_

Are you able to attend daytime activities? \_\_\_\_\_ evening activities? \_\_\_\_\_ AWOG Area \_\_\_\_\_

**Special Interests and Talents (Please check those that apply to you)**

Computer \_\_\_ Writing \_\_\_ Art Work/Graphic Design \_\_\_ Photography \_\_\_ Music \_\_\_ Fundraising \_\_\_

Publicity/Public Relations \_\_\_ Sponsorships \_\_\_ Fundraising \_\_\_ Crafting \_\_\_ Sewing \_\_\_

Stuffing Heart Pillows \_\_\_ **The AWOG Christmas Bazaar** \_\_\_ **Community Service Visitations** \_\_\_

Hands On Volunteering at institutions AWOG supports \_\_\_\_\_ Other \_\_\_\_\_

Signature of Applicant \_\_\_\_\_ Dated \_\_\_\_\_

**Sponsors**

\_\_\_\_\_

\_\_\_\_\_

Name and Signature

Name and Signature

**Dues are Euro 40.00 yearly. You must be sponsored by two current members.**

**\*Non american citizens residing in Greece and sufficient in English may become Members upon written application that must be signed by two members and upon approval of the Board of Directors.**