



Membership Application

To become a member of the Destin Woman's Club, please complete the form below and mail along with your \$50.00 check for annual dues, payable to:

Destin Woman's Club
P.O. Box 9267
Miramar Beach, Florida 32550

Please print the following information:

Name: _____ Husband's Name: _____

Address: _____ City: _____ State: ___ Zip: _____

Home Phone: _____ Mobile: _____

E-mail: _____

Birthday Month: _____ Day: _____

Career/Work Experience/Offices Held, etc.:

Favorite Hobbies/Interests:

Members help/serve in some capacity on a Committee if not otherwise serving as a Club Officer.

Please indicate all areas that you are interested in:

- | | | | | |
|--|---------------------------------------|---|---|---------------------------------------|
| <input type="checkbox"/> Treasurer/Finance | <input type="checkbox"/> Fashion Show | <input type="checkbox"/> Fundraising | <input type="checkbox"/> Assistance Fund | <input type="checkbox"/> Fisher House |
| <input type="checkbox"/> Scholarship | <input type="checkbox"/> Hospitality | <input type="checkbox"/> Reservations | <input type="checkbox"/> Restaurants | <input type="checkbox"/> Membership |
| <input type="checkbox"/> Historian | <input type="checkbox"/> Programs | <input type="checkbox"/> Christmas Parade | <input type="checkbox"/> Sponsorship Task Force | |
| <input type="checkbox"/> Friend to Friend | <input type="checkbox"/> Newsletter | <input type="checkbox"/> Publicity/Website/Facebook | | |

Signature: _____

DWC Sponsor: _____ Date: _____

Thank you for submitting your application!
You will be contacted by the Membership Committee.

www.destinwomansclub.org.

Destin Woman's Club, Inc. is a 501(c)(3) non-profit organization.