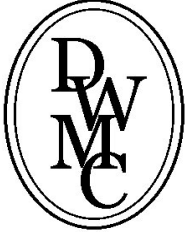


Delhi Women & Men's Club Membership Application

PO Box 452, Delhi, NY 13753
www.delhiwmc.org



DATE: _____

NAME: _____

D.OB _____

ADDRESS: _____

BEST CONTACT NUMBERS: _____

EMAIL ADDRESS: _____

Please tell us about any special skills or qualifications: _____

VOLUNTEERING OPPORTUNITIES - please select at least one

___ Publicity Committee

___ Community Outreach

___ Dinner Committee

___ Events

___ Scholarship Committee

___ Fundraising

___ Finance Committee

___ Membership Enrollment