



AFDW Membership Application/Renewal Form for 2010

Mail this form and \$10 membership dues to:

Pam Wallace
24854 Woodmont Way
Athens, AL 35613

Please print clearly

First Name _____ Last Name _____

Street Address _____

City _____ State _____ Zip Code _____

Phone 1 _____ Phone 2 _____

Email _____

County _____

AL House District # and House Member's Name _____

AL Senate District # and Senate Member's Name _____

U.S. House District # and U.S. House Member's Name _____

- General Membership \$10
 Supporting Membership \$100
 Sustaining Membership \$500
 Other Amount _____

Yes, I give my permission to have my name and contact information printed in the AFDW Member Directory. It will be available to other AFDW members.

No, please do not include my information in the AFDW Member Directory.

Use the space below to list your concerns regarding issues that face Alabama, and particularly Alabama women. This information will be useful in addressing member concerns, speakers, and programs.
