



SENECA WOMAN'S CLUB MEMBERSHIP FORM - NEW MEMBERS

**Checks should be made payable to the Seneca Woman's Club.
Mail Form and Check to Seneca Woman's Club, PO BOX 2084, Seneca, SC 29679**

MEMBERSHIP DUES: \$25.00
Optional Tax-Deductible contribution to the Foundation: \$ _____
Optional Tax-Deductible contribution to operating expenses: \$ _____
Optional Tax-Deductible contribution to annual scholarships: \$ _____

If any of the three optional items above equal the three listed below, you will be listed in our directory with the matching designation:

Patron: \$750 may be paid over a two-year period.
Founder: \$500
Donor: \$250

Total Enclosed \$ _____

Name _____ Optional: Birthday Day/Month _____

Address _____ Zip _____

E-mail address: _____

Home Phone: _____ Cell phone: _____

Once accepted, you will be a Member at Large of the Seneca Woman's Club. Do you have a SWC sponsor?
If yes, please include their name. _____

Place an X by at least one Volunteer Preference. The SWC encourages and needs your involvement!

- A. House decorating _____
- B. Gardening workdays _____
- C. Kitchen duty during events _____
- D. Prepare food for events _____
- E. Birthday Cakes for United Way _____
- F. Ways and Means _____
- G. Help with Fundraisers _____
- H. House sit during hours open to the public _____

Please X your areas of interest or write your specific skills or interests:

Computer Experience/Skills _____ Finance _____ Grants _____ Event Promotions _____
Publicity _____ Obtaining Sponsors _____ Web Site management experience _____
Other _____