



The Woman's Club
 211 East Franklin Street
 Richmond, Virginia 23219

Office Use Only

Application received by Office	_____
Read to Board of Governors:	_____
Elected to Membership:	_____
Resignation:	_____

MEMBERSHIP REINSTATEMENT APPLICATION
A PHOTO OF THE APPLICANT IS REQUIRED

Category applied for _____ **Resident** _____ **Non-Resident** (Bylaws, Article I)

Date: _____ Date of Previous Resignation: _____

Full Name: _____ Title: _____
 (Last) (First) (Middle/Maiden) (Name you wish to be called) (Miss/Ms./Mrs.)

Spouse's Full Name (if applicable): _____

Name as you would like it to appear in the Yearbook: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: (H) _____ (W) _____
 (Cell) _____ (Fax) _____

E-Mail Address: _____ Length of Residence in Richmond: _____

Date of Birth: Month _____ Day _____ Year _____ Birthplace: _____

Education: _____

Employment: _____ Position: _____

_____ Position: _____

_____ Position: _____

Names and years of birth of Daughters & Granddaughters: _____

Names of relatives who are members of the club (give relationship): _____

Names of several members who know the candidate: _____

Original Proposer: _____

- | | | | |
|------------------|--|---|--|
| Skills & Talents | <input type="checkbox"/> Archiving/Scrapbooking | <input type="checkbox"/> Flower Arranging | <input type="checkbox"/> Photography |
| | <input type="checkbox"/> Copy Editing | <input type="checkbox"/> Horticulture/Grounds | <input type="checkbox"/> Social Media Communications |
| | <input type="checkbox"/> Development/Fundraising | <input type="checkbox"/> Law/Polycymaking | <input type="checkbox"/> Trip Planning |
| | <input type="checkbox"/> Event Management | <input type="checkbox"/> Library | <input type="checkbox"/> Website Design and Management |
| | <input type="checkbox"/> Finance | <input type="checkbox"/> Marketing/Public Relations | <input type="checkbox"/> Other _____ |