

MONTREAL LAKESHORE UNIVERSITY WOMEN'S CLUB

www.mluwc.com

Your membership application and a cheque payable to **MLUWC** must be sent to

Marie-Belle Cunningham, unit 15, 555 Montrose Dr, Beaconsfield, QC H9W 6B4

FEES: Regular \$95 Associate \$95 Dual: please contact Marie-Belle 514 426-4454

2009-2010
Membership Application
PLEASE PRINT

**If your name is printed on your cheque,
you do NOT need to fill in this form
unless you are a new member or there are
changes.**

Name _____

Maiden Name _____

Address _____

City _____ Postal code _____

Tel: Res () _____

Bus () _____

E-mail address _____

University _____

Degree _____ Year _____ PAGE

University _____

Degree _____ Year _____

University _____

Degree _____ Year _____

Have you ever previously been a member of another CFUW club? If yes, which one? _____

Your monthly newsletter will be sent to your e-mail address if listed above. If you do not have access to e-mail, please request a hard copy. **Hard copy please** _____

COMMITTEE INVOLVEMENT

We encourage all members to participate in the club activities. Please indicate where you have an interest.

INTEREST GROUPS _____

ARCHIVES _____

FUNDRAISING _____

HOSPITALITY _____

MEMBERSHIP _____

NEWSLETTER _____

PROGRAMME _____

PUBLICITY _____

WEB PAGE _____

OTHER _____

Business-card size **advertising** is available at the back of the membership directory:

\$45.00 for the year. Please contact Marie-Belle at (514) 426 – 4454

mluwc.membership@gmail.com

NEW MEMBERS: PLEASE INCLUDE COMPLETED WHITE CARD WITH YOUR APPLICATION FORM