

Do you have a friend who would be interested in FAUSA? Please make a copy of this application, or forward it by email.

FAUSA, INC.
(FAWCO Alumnae USA, Inc.)

MEMBERSHIP APPLICATION / RENEWAL

Office use only

Email: _____
 Membership Card: ____
 Directory: _____
 Constant Contact: ____
 Fee: _____
 Scholarship: _____
 Charity: _____

1. MEMBER INFORMATION

Please print clearly and provide complete information, even if renewing member, so that we have most current information.

New membership

Renewing Membership

Date:		
Name:		
	Home	Work (if applicable)
Address 1		
Address 2		
City, State		
Zip		
Telephone		Cell
Email		
Birthday	Month: _____ Day: _____	Voting State
Age:	<input type="checkbox"/> under 30 <input type="checkbox"/> 30 to 40 <input type="checkbox"/> 40 to 50 <input type="checkbox"/> 50 to 60 <input type="checkbox"/> 60 to 70 <input type="checkbox"/> over 70	
Occupation / Job title (if working outside the home)		
If you have children at home, please list ages:		

2. FAUSA AREAS OF INTEREST

- Would you be willing now, or in the future, to be a Regional Representative or Metropolitan Coordinator?
 Yes, please contact me with more details. No, not at this time.
- Would you be interested in serving on any committees? Please check all that apply:
 Annual Meetings Awards Newsletter
 Public Relations Repatriation Committee Website

3. DUES

Please indicate appropriate membership level and indicate FAWCO club affiliation as appropriate

Membership level		Club Affiliation / Overseas Location	Amount
Regular (affiliated with a FAWCO-member club when living overseas)	\$25		\$
Overseas (currently living overseas and affiliated w/FAWCO-member club)	\$25		\$
Associate (not affiliated with a FAWCO-member club when living overseas)	\$25		\$
Guest (not a US citizen when overseas)	\$25		\$
Additional donations (optional)		FAUSA Scholarship Award	\$
		FAUSA Charity Fund	\$
		Total	\$

Please return this application with a US\$ check made out to **FAUSA, Inc.** If you are including donations with your membership, please indicate clearly on the form and on the check if possible. Please mail your application and payment to:

Sue Ripps, FAUSA Treasurer
4261 Ridgehurst Drive
Smyrna, Georgia 30080

- If you have any questions about membership, please contact Membership at info.fausa@gmail.com
- For more information on FAUSA membership benefits or the club, please check our website at www.fausa.org
 FAWCO Alumnae USA, Inc. (FAUSA) is a not-for-profit 501 (c) (4) organization.