



MEMBERSHIP APPLICATION

July 1, 2018 – June 30, 2020

PLEASE CHECK ONE OF THE FOLLOWING: NEW MEMBERSHIP RENEWAL MEMBERSHIP

DATE: _____

NAME: _____

FACULTY STAFF STUDENT COMMUNITY MEMBER

TITLE/POSITION: _____

DEPARTMENT: _____

OFFICE LOCATION (Please check one):

GT Campus RV Campus TP/SS Campus Central Services (CT) WD&CE Community Member

(Building and Room): _____

EMAIL: _____ PHONE: _____

Please make check payable to MC-AAWCC and send to:
Rhonda McLaren-Scott, Financial Aid, RV Campus, Room SV-118
Rhonda.McLaren-Scott@montgomerycollege.edu or x74155

Enclosed is \$50 for two-year membership in the MC-AAWCC Chapter and National Chapter

Optional:

Please select the committee(s) you are interested in helping with this year:

Membership Program Finance Communication

Please select the event(s) you are interested in helping with this year:

Membership Drives Conference Planning Strategic Planning
 Fundraising Drives Book Discussions National Day of Dialogue

For Office Use Only Date:_____ Check # _____ __ Membership List __ Distribution List __ Confirmation Sent
