

AMERICAN ASSOCIATION FOR WOMEN IN COMMUNITY COLLEGES Montgomery College Chapter

MEMBERSHIP APPLICATION

Fall 2017 – Spring 2018 Academic Year

PLEASE CHECK ONE OF 1	THE FOLLOWING:	□ NEW MEMBERSH	IP □ RENEWA	L MEMBERSHIP
DATE:				
NAME:				
□ FACULTY □ STAF	F			
TITLE/POSITION:				
DEPARTMENT:				
OFFICE LOCATION: (Plea	se check one)			
☐ GT Campus ☐ RV Cam	pus TP/SS Campus	□ Other		
(Building and Room):				
EMAIL:	//AIL: PHONE:			
Optional:	moersing in the ivie A	AWCC Chapter and the AA\	vvec National Chapter	
•	ttee(s) you are interest	ed in helping with this yea	r:	
□ Members	□ Program	☐ Finance	☐ Communication	
Please select the events	/activities you are inte	erested in helping with thi	s year:	
☐ Membership Drives		Conference Planning	☐ Strategic Planning	:
☐ Fundraising Drives		Book Discussions	☐ National Day of Di	ialogue
				For Offic Date: Ch Membership Distribution L

Confirmation Sent