



AWC MEMBERSHIP APPLICATION
You can also apply online at www.womcom.org

Date of Application: _____
Month Day Year

Referred By (if applicable): _____
(first name, last name)
**Insert only one member's name.*

1. CONTACT INFORMATION:

First Name: _____ Middle Name: _____ Last Name: _____

Provide **BOTH** a **PRIMARY** Address as well as an **ALTERNATE** Address:

PRIMARY: Business Home Permanent

ALTERNATE: Business Home Permanent

Address 1

Address 1

Address 2

Address 2

City State Zip Code (5 digits Only)

City State Zip Code (5 digits Only)

E-mail

E-mail

() -
Phone # including area code

() -
Phone # including area code

2. DEMOGRAPHIC INFORMATION:

Please complete all requested information below:

Gender:
 Female Male

Company Name:

Birth Date: _____
MM/DD/YYYY

Employer:
 For-Profit: 100+ employees
 For-Profit: -100 employees
 Non-Profit: 100+ employees
 Non-Profit: -100 employees

Education:
 High School
 Associates
 Bachelors
 Masters/Graduate
 Other: _____

Employment Status:
 Full-time
 Part-time
 Consultant/Freelancer
 Business Owner
 Unemployed
 Retired
 Other: _____

Field/Discipline:

Professional Title:



3. Membership Category:

Choose from ONE of the following memberships:

- Executive Professional Communicator **\$189.00**
- Professional Communicator **\$129.00**
- Entrepreneur Professional Communicator **\$114.00**
BY CHECKING THIS BOX, I AGREE THAT I AM SELF-EMPLOYED AND HAVE NO EMPLOYEES OR ADDITIONAL SOURCES OF INCOME
- Retired Professional Communicator **\$34.00**
BY CHECKING THIS BOX, I AGREE THAT I AM RETIRED AND DO NOT WORK PART-TIME OR SERVE AS A PAID CONSULTANT
- Faculty Advisor **\$0.00**
FULL NAME OF SCHOOL REQUIRED:

BY CHECKING THIS BOX, I AGREE THAT I AM A FACULTY ADVISOR FOR THE AWC STUDENT CHAPTER LISTED ABOVE

- New Graduate Member **\$34.00**
GRADUATION DATE REQUIRED:

(MM-YYYY)

BY CHECKING THIS BOX, I AGREE THAT I AM A NEW GRADUATE AND CAN PROVIDE PROOF

- Collegiate Member **\$34.00**
GRADUATION DATE REQUIRED:

(MM-YYYY)

FULL NAME OF SCHOOL REQUIRED:

BY CHECKING THIS BOX, I AGREE THAT I AM A FULL-TIME STUDENT AND CAN PROVIDE PROOF

3. NATIONAL MEMBERSHIP DUES SUBTOTAL \$ _____ .00

4. National Application Fee:

Choose from ONE of the following one-time national application fees:

- National Application Fee **WAIVED ~~\$50.00~~**
- WAIVED – Faculty Advisor **\$0.00**
- WAIVED – Retired Member **\$0.00**
- WAIVED – New Graduate Member **\$0.00**
- WAIVED – Collegiate Member **\$0.00**

4. NATIONAL APPLICATION FEE SUBTOTAL \$ 00 .00

5. Chapter Application Fee (alphabetical order by state):

Choose from ONE of the following one-time chapter application fees:

- Texas-Austin **WAIVED ~~\$10.00~~**
- Chapter not listed **\$0.00**
- Texas-Dallas **\$15.00**
- WAIVED – Faculty Advisor **\$0.00**
- Missouri-Kansas City **\$5.00**
- WAIVED -- Retired Member **\$0.00**
- Wisconsin-Madison **WAIVED ~~\$25.00~~**
- WAIVED – Collegiate Member **\$0.00**
- WAIVED – New Graduate Member **\$0.00**

5. CHAPTER APPLICATION FEE SUBTOTAL \$ _____ .00

Revised 05/2010

Fax or Mail payments to:

AWC National Headquarters • 3337 Duke Street • Alexandria, VA 22314
Phone: (703) 370-7436 • Fax: (703) 342-4311 • members@womcom.org • www.womcom.org



6. Chapter Dues (alphabetical order by state):

- | | | | |
|--------------------------|---|---------|-----------------------|
| <input type="checkbox"/> | NO AFFILIATION WITH A CHAPTER-
Independent | N/A | |
| <input type="checkbox"/> | STUDENT CHAPTER-
Student Chapter (School Name) | N/A | |
| <input type="checkbox"/> | CALIFORNIA-
<u>Santa Barbara, CA</u> | | |
| | <input type="checkbox"/> Professional/Retiree Special Rate! | \$25.00 | |
| | <input type="checkbox"/> Collegiate/New Grad Special Rate! | \$7.50 | |
| <input type="checkbox"/> | DISTRICT OF COLUMBIA-
<u>Washington, D.C.</u> | | |
| | <input type="checkbox"/> Professional Special Rate! | \$20.00 | |
| | <input type="checkbox"/> Collegiate/New Grad Special Rate! | \$20.00 | |
| | <input type="checkbox"/> Retiree | \$20.00 | |
| <input type="checkbox"/> | FLORIDA-
<u>South Florida, FL</u> | | |
| | <input type="checkbox"/> Professional | \$30.00 | |
| | <input type="checkbox"/> Collegiate/New Grad | \$20.00 | |
| | <input type="checkbox"/> Retiree | \$25.00 | |
| <input type="checkbox"/> | IOWA-
<u>Des Moines, IA</u> | | |
| | <input type="checkbox"/> ALL MEMBERS | \$30.00 | |
| <input type="checkbox"/> | ILLINOIS-
<u>Bloomington/Normal, IL</u> | | |
| | <input type="checkbox"/> Professional/Retiree | \$25.00 | |
| | <input type="checkbox"/> Collegiate/New Grad | \$0.00 | |
| | <u>Springfield, IL</u> | | |
| | <input type="checkbox"/> ALL MEMBERS | \$25.00 | |
| <input type="checkbox"/> | INDIANA-
<u>Lafayette, IN</u> | | |
| | <input type="checkbox"/> ALL MEMBERS | \$10.00 | |
| <input type="checkbox"/> | KANSAS-
<u>Topeka, KS</u> | | |
| | <input type="checkbox"/> ALL MEMBERS | \$15.00 | |
| <input type="checkbox"/> | MICHIGAN-
<u>Detroit, MI</u> | | |
| | <input type="checkbox"/> Professional | \$40.00 | |
| | <input type="checkbox"/> Collegiate/New Grad | \$10.00 | |
| | <input type="checkbox"/> Retiree | \$20.00 | |
| <input type="checkbox"/> | MISSOURI-
<u>Kansas City, MO</u> | | |
| | <input type="checkbox"/> Professional | \$30.00 | |
| | <input type="checkbox"/> Collegiate/New Grad | \$20.00 | |
| | <input type="checkbox"/> Retiree | \$15.00 | |
| | <u>Springfield, MO</u> | | |
| | <input type="checkbox"/> Professional | \$20.00 | |
| | <input type="checkbox"/> Collegiate/New Grad | \$10.00 | |
| | <input type="checkbox"/> Retiree | \$10.00 | |
| <input type="checkbox"/> | NEW MEXICO-
<u>Albuquerque, NM</u> | | |
| | <input type="checkbox"/> Professional | | WAIVED \$25.00 |
| | <input type="checkbox"/> Collegiate/New Grad | | WAIVED \$15.00 |
| | <input type="checkbox"/> Retiree | | WAIVED \$5.00 |
| <input type="checkbox"/> | NEW JERSEY-
<u>Northern New Jersey, NJ</u> | | |
| | <input type="checkbox"/> ALL MEMBERS | \$20.00 | |
| <input type="checkbox"/> | NEW YORK-
<u>Rochester, NY</u> | | |
| | <input type="checkbox"/> ALL MEMBERS | \$20.00 | |
| <input type="checkbox"/> | OKLAHOMA-
<u>Oklahoma City, OK</u> | | |
| | <input type="checkbox"/> ALL MEMBERS | \$20.00 | |
| | <u>Tulsa, OK</u> | | |
| | <input type="checkbox"/> Professional | \$20.00 | |
| | <input type="checkbox"/> Collegiate/New Grad | \$0.00 | |
| | <input type="checkbox"/> Retiree | \$5.00 | |
| <input type="checkbox"/> | TEXAS-
<u>Austin, TX</u> | | |
| | <input type="checkbox"/> Professional | \$35.00 | |
| | <input type="checkbox"/> Collegiate/New Grad | \$25.00 | |
| | <input type="checkbox"/> Retiree | \$0.00 | |
| | <u>Dallas, TX</u> | | |
| | <input type="checkbox"/> Professional | \$45.00 | |
| | <input type="checkbox"/> Collegiate/New Grad | \$20.00 | |
| | <input type="checkbox"/> Retiree | \$0.00 | |
| | <u>Lubbock, TX</u> | | |
| | <input type="checkbox"/> ALL MEMBERS | \$0.00 | |
| | <u>San Antonio, TX</u> | | |
| | <input type="checkbox"/> Professional | \$25.00 | |
| | <input type="checkbox"/> Collegiate/New Grad | \$20.00 | |
| | <input type="checkbox"/> Retiree | \$10.00 | |
| <input type="checkbox"/> | WASHINGTON-
<u>Seattle, WA</u> 50% off below rates 9/27-10/27 | | |
| | <input type="checkbox"/> Professional | \$60.00 | |
| | <input type="checkbox"/> Collegiate/New Grad | \$15.00 | |
| | <input type="checkbox"/> Retiree | \$20.00 | |
| <input type="checkbox"/> | WISCONSIN-
<u>Madison, WI</u> | | |
| | <input type="checkbox"/> Professional | | WAIVED \$30.00 |
| | <input type="checkbox"/> Collegiate/New Grad | \$16.00 | |
| | <input type="checkbox"/> Retiree | \$0.00 | |
| | <u>SE WISCONSIN, WI</u> | | |
| | <input type="checkbox"/> ALL MEMBERS | \$25.00 | |

6. CHAPTER DUES **SUBTOTAL** \$ _____ **.00**

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**Any AWC member who does not complete renewal within 30 days past the membership expiration date will lose membership status and will need to join again, receiving a new join date and paying the \$50 application fee.

I AGREE to abide by the bylaws, policies, and procedures of AWC

Would you like your name added to a volunteers list? Yes
(If national or chapters need volunteers they will ask members on this list.)

PAYMENT OPTIONS:

Check made payable to **AWC**

Debit Card

Choose from the following:

Visa *MasterCard* *American Express*

Credit Card

Choose from the following:

Visa *MasterCard* *American Express*

Credit Card Information:

Credit Card #: _____ - _____ - _____ - _____

Security Code #: _____

Expiration Date: ____ / ____

Name on Card: _____

Billing Address: _____

Signature: _____

TOTAL DUE:

3. National Membership Dues	\$	_____	.00
4. National Application Fee	\$	_____	.00
5. Chapter Application Fee	\$	_____	.00
6. Chapter Dues	\$	_____	.00
TOTAL =		\$	_____

I authorize the above amount to be charged to my credit card.

You also can join online at: www.womcom.org

AWC Memberships are non-refundable and non-transferable

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