



____ MEMBERSHIP APPLICATION OR ____ RENEWAL

Name(s)

1. _____

Email _____

2. _____

Email _____

Mailing Address _____

____ This is a new or corrected address

Phone _____

General Memberships

____ Individual.....\$45

____ Family/Dual.....\$65

____ Senior (age 65 and over).....\$35

____ Senior/Dual (two seniors at one address)
.....\$55

Full-time Student\$10

Special Memberships

Sustaining.....\$100

Corporate.....\$500

Patron.....\$500

____ Any Patron-level donor may choose to have their gift underwrite a specific scheduled speaker. Please check above if you would like to discuss this with a WACSC officer.

Donations

A donation of any amount in addition to your membership dues will help continue and expand the robust level of programming you have come to expect from the World Affairs Council of Sonoma County. As a 501(c)(3) charitable organization, both dues and donations are tax deductible to the full extent of the law.

Enclosed is my check for:

Membership \$ _____

Charitable donation \$ _____

TOTAL \$ _____

My charitable donation is

(__) IN MEMORY (__) IN HONOR of:

NAME _____

Please mail this form with your check to:
WACSC, P.O. Box 1433, Santa Rosa, CA
95402-1433. Questions or comments? Phone
(707) 573-6014.