

HELLENIC AMERICAN WOMEN'S COUNCIL

H A W C



**2021 MEMBERSHIP APPLICATION**

Please complete this application form completely. We are updating our database to ensure all your contact information is correct. Include your preferred E-Mail Address, as we will use it as our main form of communication.

Name \_\_\_\_\_

Preferred E-Mail Address \_\_\_\_\_

Home: Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Business Address: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

If you do **NOT** want your information included in a HAWC membership/networking directory that is distributed to members only, please check here \_\_\_\_\_

**Are you interested in joining any committees/activities? Please circle all that apply.**

Youth Affairs    Public Relations    Fundraising    Membership    Communications

Educational/Cultural    Website    Other: \_\_\_\_\_

**Membership dues:**

Individual: \$50.00    Student: \$25.00

Institutional: \$100.00    Lifetime: \$1000.00

Please mail the completed application with your check to:

HAWC  
1025 Connecticut Ave., N.W.  
Suite 1000  
Washington, D.C. 20036-1802

Or join online: [www.hawcnet.org](http://www.hawcnet.org)