

Sutter Creek Woman's Club



Established 1909

MEMBERSHIP APPLICATION

Name _____ Husband's Name _____

Mailing Address _____

Street Address (if different) _____

City _____ Zip Code _____

Phone Number (H) _____ Phone Number (W) _____

Email Address _____

Birthday Month and Day _____

Hobbies and Interests _____

Special Talents _____

How did you hear about SCWC? _____

Are you new to the area? _____ If so, where are you from? _____

Mail complete application form and a check payable to Sutter Creek Woman's Club

In the amount of \$25 (\$12.50 if joining between Jan 1st and May 1st) to:

Bobbie Brubaker, SCWC Membership

P.O. Box 837

Sutter Creek, CA 95685

Email: dbbrubaker@softcom.net

