



**BPW/Michigan  
2019-2020 Membership Form**

**LOCAL DUES, IF ANY, MUST BE PAID DIRECTLY TO THE LOCAL ORGANIZATION.  
TAKE THIS FORM TO YOUR LOCAL TREASURER AND SHE WILL FORWARD THE  
STATE DUES.**

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

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

Zip \_\_\_\_\_ Birthdate: Month \_\_\_\_\_ Day \_\_\_\_\_

BPW Local Organization/Affiliate \_\_\_\_\_

Business / Profession \_\_\_\_\_

Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

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

E-mail address \_\_\_\_\_, \_\_\_\_\_

If a new member, please name the person who recruited you \_\_\_\_\_

New: \_\_\_\_\_ Date \_\_\_\_\_

Individual Membership:

For BPW members: \$60.00 (prorated by month)\*

For Affiliate members: \$60.00(prorated by month)\*

For BPW Student members: \$30.00 (prorated)\*

Renewal: \_\_\_\_\_ Date \_\_\_\_\_

Individual Membership:

For BPW members: \$60.00

For Affiliate members: \$60.00

For BPW Student members: \$30.00

\*to May 31, 2018

\$ \_\_\_\_\_

\$ \_\_\_\_\_

**Total Enclosed:**

**Local Treasurers or Affiliate Members** – please mail form and checks to:

Shirley Zeller, BPW/MI Membership Chair  
702 Burr Oak, Albion, MI 49224

Email: [seztowne@gmail.com](mailto:seztowne@gmail.com)

Phone: 517-629-5345 or 517-945-6911