



**BPW/Michigan
2018-2019 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 _____	Renewal: _____ Date _____
Individual Membership:	Individual Membership:
For BPW members: \$60.00 (prorated by month)*	For BPW members: \$60.00
For Affiliate members: \$60.00(prorated by month)*	For Affiliate members: \$60.00
For BPW Student members: \$30.00 (prorated)*	For BPW Student members: \$30.00
	\$ _____
	\$ _____

Total Enclosed:

If necessary to make payments for state dues, please use this form to submit payments
Total - \$60.00
Paid - \$ _____
Balance - \$ _____

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