



Peninsula Writers Membership Registration / Renewal

Whether you're just now joining Peninsula Writers ... renewing your membership for the first time ... or registering for the 30-somethingth time, we look forward to having you as a member of our writing community.

Please note: Your PW membership becomes active upon receipt of dues payment of \$50 along with this completed membership form. Prior to expiration of your membership, you will receive notification of your renewal date.

REQUIRED INFORMATION [Please see "OPT-OUT" and "OPTIONAL INFORMATION" preferences below.]

Please print.

NAME [As you would like it listed in the Membership Directory.] _____

MAILING ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____

EMAIL [Required to receive PW communications.] _____

HOME PHONE # _____

CELL PHONE # _____

* **OPT-OUT.** Please indicate which of the following, if any, you *do not want included* in the Membership Directory.

- Mailing address.
- Home phone number.
- Cell phone number.

Please provide the following additional **OPTIONAL INFORMATION** that you would like included in the Directory.

OCCUPATION & EMPLOYER _____

TYPE OF WRITING _____

WEBSITE ADDRESS [if applicable] _____

Return this form to: cerise.fuhrman@gmail.com
 Send your \$50 dues check, payable to Peninsula Writers, to:
 PW Membership, c/o SJBTS
 PO BOX 1
 St. Johns, MI 48879

This is a **GIFT MEMBERSHIP**.

Please provide the name & mailing address *OR* email address for this individual on a Membership Form *separate from yours*, and follow payment instructions above.

Your gift will remain confidential.

FOR OFFICE USE ONLY LAST

NAME _____

FIRST NAME _____

CH # _____ **AMT** _____

DATE RECEIVED _____

GIFT MEMBERSHIP for:
