



# Soroptimist International of Pittsburg Membership Application

Membership Fee \$180.00
Amount Received \$ _____
Check # _____

Thank you for your interest in Soroptimist International of Pittsburg. If you are a woman who wishes to improve the lives of women and girls in an atmosphere of support, friendship and fun, then joining Soroptimist may be right for you. Please complete this form and return it to any member of this club.

Name \_\_\_\_\_ Birthdate \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Email \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Work Email \_\_\_\_\_

Birthdate \_\_\_\_\_

Former member:       Yes       No

Business Name: \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Nature of Business: \_\_\_\_\_

Title/Position Held: \_\_\_\_\_

Preferred Contact Method (phone/email/text) \_\_\_\_\_

Husband/Partner's Name \_\_\_\_\_

Applicant's Signature \_\_\_\_\_

Additional comments, which will be helpful, including whether personally know to member submitting name:

\_\_\_\_\_  
\_\_\_\_\_

New Member Referred by: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

Date Received by Membership Chairperson: \_\_\_\_\_

Date Dues Paid \_\_\_\_\_ Date Inducted \_\_\_\_\_

### Si-Pittsburg Distribution/Process

- Original Form to Membership Chairperson (keeps original in binder)
- Membership Chair will give a copy to Treasurer with dues payment
- Membership Chair will give a copy to Roster Chairperson or Secretary
- Treasurer completes Form 5008 online with SIA-HQ and forwards copy to Founder Region