

Saint Rose Women's Club Membership Form

Welcome! We are glad you decided to join! Please complete this form.

Contact wcmembershipstrose@gmail.com for dues information (\$15) and an address to send your membership form and payment.

First Name	
Last Name	
Street	
Town	
State	
Zip Code	
Phone (Landline)	
Phone (Cell)	
Birthday (optional)	

Have there been any Women's Club activities you have especially enjoyed?

Are there any new activities that you would like to see the Club offer?

Do you have any other comments you would like to make?

If you have any questions, please email wcmembershipstrose@gmail.com.