



# American Association of University Women Boulder, Colorado Branch Membership Form

**CURRENT DATE** \_\_\_\_\_

**MEMBERSHIP #** (for Transfers & Members at Large) \_\_\_\_\_

**NAME** \_\_\_\_\_  
Last First Middle

**ADDRESS** \_\_\_\_\_  
Number Street City Zip Code

**TELEPHONE:** Home \_\_\_\_\_  
Work \_\_\_\_\_  
Cell \_\_\_\_\_

**EMAIL** \_\_\_\_\_

**SPOUSE'S/PARTNER'S NAME** \_\_\_\_\_

UNIVERSITY(IES) ATTENDED	Field(s) of Study	Date(s)	Degree(s)

## OCCUPATIONAL INFORMATION

Job Title/Employer \_\_\_\_\_

Retired from \_\_\_\_\_ Homemaker \_\_\_\_\_

## VOLUNTEER ACTIVITIES / PERSONAL INTERESTS / HOBBIES

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

(over)

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**QUESTIONS ABOUT YOU**

1. How long have you lived in this area? \_\_\_\_\_
  
2. Where have you lived before moving here? \_\_\_\_\_  
\_\_\_\_\_
  
3. What drew you to AAUW? \_\_\_\_\_  
\_\_\_\_\_
  
4. Are you a new member to AAUW? \_\_\_\_\_ If not, where were you a member before joining Boulder AAUW? \_\_\_\_\_
  
5. Tell us about a favorite part of your career \_\_\_\_\_  
\_\_\_\_\_

**PLEASE INCLUDE A PICTURE OF YOURSELF**

Included with application (please check box)

**PLEASE INCLUDE A 250-WORD BIOGRAPHY**

Included with application (please check box)

Please return this form with dues (make checks payable to Boulder AAUW) to:  
Ann Smith  
857 Hoover Ave  
Louisville, CO 80027-2294

OR email this form to Ann Smith at [smithannah@aol.com](mailto:smithannah@aol.com)  
and pay with PayPal using the "Buy Now" Button.