



2009 Membership Information

Complete and return no later than January 17, 2009

(Please Print)

Last Name _____ First Name _____

Company _____ Title _____

Business Address _____ City _____ Zip _____

Category of Business/Nature of Duties _____

Business Phone _____ Business Fax _____

Business E-mail _____

Web Site _____

Home Address _____ City _____ Zip _____

Home Phone _____ Fax _____ E-Mail _____

Birthday (Month/Day) _____ Cell Phone _____

Prefer to receive Monthly Newsletter at: Home or Office E-mail or Hard Copy

MAIL FORM TO:

**Network for Executive Women
P. O. Box 101165
Fort Worth TX 76185-1165**

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|---|---|
| <p><u>Membership Dues:</u> \$50 \$ _____</p> <p><u>Directory*:</u> \$ 5 \$ _____</p> <p>TOTAL.....\$ _____</p> <p><i>NOTE: Please pay by CHECK ONLY!</i></p> | <p><i>For use by Network Officer:</i></p> <p>Received \$ _____ Date _____ Check # _____</p> |
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*3-ring directory, notebook, \$5. If paying online at <http://Network for EnterprisingWomen.org>, please turn in the Membership Information sheet to the treasurer or membership director.

NOTE: *The information you provide on this form will be used for the 2009 Membership Directory. You may provide additional information if you desire.*

Revised 12/2008