



**NETWORK OF
EXECUTIVE
WOMEN INC.**

P.O. Box 3171 Milford, Connecticut 06460

MEMBERSHIP APPLICATION

Committee use only:

Accepted _____

Informed _____

Billed _____

Paid _____

Network of Executive Women addresses the common business interests and issues of women in executive, professional and entrepreneurial roles through the exchange of ideas, information, and experience. The information contained herein is for the use of the Membership Committee and Board of Directors of Network of Executive Women. No personal information contained in this application shall be released or used for other than internal purposes without specific consent. Membership is limited in the ByLaws to women in management, professionals and entrepreneurs who are involved in decision and policy making for their respective companies. ***Applicant must be sponsored by a Network member and attach a signed "Application Cover Sheet."*** All applications are subject to the review and approval by the Board of Directors. The Board may contact your sponsor as your application is considered.

NAME:	COMPANY NAME:
¹ HOME ADDRESS:	ADDRESS:
CITY, STATE, ZIP:	CITY, STATE, ZIP:
	POSITION/TITLE:
HOME TELEPHONE:	BUS. TELEPHONE:
FAX:	EXTENSION IF APPLICABLE:
E-MAIL:	
WEBSITE:	
YEARS WITH THIS COMPANY:	IN THIS POSITION:
² Please describe in detail your function within the business/agency/organization and your managerial responsibilities and supervisory function:	

¹ Home phone and address are only for internal purposes and will not be published in the membership directory or online.

² Please feel free to attach a copy of your recent resume.

Formal education (degrees, schools attended):		
Other education (seminars, continuing education, special training):		
Professional Groups/Affiliates (Civic or Business related):		
What contributions of professional/business expertise could you offer the Network?		
Please indicate one or more of the following committees on which you are willing to serve (please refer to Application Cover Sheet for descriptions and information):		
<input type="checkbox"/> Activities	<input type="checkbox"/> Historian	<input type="checkbox"/> Marketing
<input type="checkbox"/> Programs	<input type="checkbox"/> Publicity	<input type="checkbox"/> Scholarship
<input type="checkbox"/> Membership	<input type="checkbox"/> Sunshine	<input type="checkbox"/> Website
<input type="checkbox"/> Newsletter		
What would you hope to get out of your Network membership in the coming year?		
Signature	Date	Sponsored by (REQUIRED)

Please submit this application with a check in the amount of **\$50**, payable to **Network of Executive Women**. Mail the application with your check to **Network of Executive Women, P.O. Box 3171, Milford, CT 06460**.

PLEASE NOTE: Because our membership year is July 1st through June 30th, applications between January 1st and June 30th are discounted to \$25. *(In case of nonapproval, your uncashed check will be returned.)*

Please check **only one** of the following categories that best describes your profession and/or business. This information is used for indexing purposes on the Website and the Membership Directory.

<input type="checkbox"/> BUSINESS SERVICES	<input type="checkbox"/> COMMUNITY SERVICES	<input type="checkbox"/> COMPUTERS & INTERNET
<input type="checkbox"/> EDUCATION & INSTRUCTION	<input type="checkbox"/> ENTERTAINMENT & ARTS	<input type="checkbox"/> FOOD & DINING
<input type="checkbox"/> HEALTH & MEDICINE	<input type="checkbox"/> HOME & GARDEN	<input type="checkbox"/> INSURANCE
<input type="checkbox"/> LEGAL & FINANCIAL	<input type="checkbox"/> PERSONAL CARE	<input type="checkbox"/> REAL ESTATE
<input type="checkbox"/> RECREATION & SPORTS	<input type="checkbox"/> RETAIL SHOPPING	<input type="checkbox"/> TRAVEL & TRANSPORTATION

Please mail this application with a check in the amount of **\$50 (or \$25 if between January 1st and June 30th)**, payable to **Network of Executive Women**, to **P.O. Box 3171, Milford, CT 06460**. *[PLEASE NOTE: Payment of membership dues is deductible for most Network members as an ordinary and necessary business expense. Contributions or gifts to Network are not deductible as charitable contributions for federal income tax purposes. You should check with your own tax professional to determine whether payment of your membership dues constitutes a business deduction under your particular circumstances.]*