



IWA
 z.Hd. Sarah Hecht
 Schirmleitenstrasse 95
 8046 Graz
 iwagraz@gmail.com
www.iwagraz.org
 ZVR-Zl.: 620868340

International *Women's* Association of Graz

Membership Application

Instructions:

- Please fill in clearly, sign and return this form to the Membership Officer via email or mail to the above address. Membership is effective after receipt of application and payment.
- In your email, ask for information about how to pay the membership fee via electronic bank transfer!**

Surname:		First Name:	
Street Address:		Postal Code and Town:	
Home Telephone:		Mobile Number:	
E-mail:		<i>A membership list including the above information is issued to <u>members only</u>. Please indicate your preference on having your e-mail address appear on list:</i>	
Country of Origin:		Citizenship:	Languages:
Living in Graz (area) since:		Birthday month	Birth date: (dd/mm/yy)
Children	Name:		Birth date: (dd/mm/yy)
A brief summary of your current and/or former occupation:			
Why would you like to become a member of the IWA?			
Hobbies:		Interests you would like to pursue with a group:	
<p>Participation: The IWA is an all-volunteer organisation and relies on the time, talents and skills of its members to function. Everyone is encouraged to be an active member through participation, involvement and support. Please consider what capabilities or experience you would be willing to share.</p>			
<p>Eligibility: Women of any nationality fluent in English and interested in the purpose of the IWA qualify. The ratio of national members may not exceed 40% of the total membership at the time of application.</p>			
<p>Fees for club membership and receipt of newsletter: Yearly dues: EUR 35.- (includes joining fee)</p>		<p><i>The club financial year runs from January to December. New members joining after June pay joining fee plus half-year dues. Renewal dues are payable by the deadline established to maintain uninterrupted membership and receipt of the newsletter.</i></p>	
<p>Would you like to receive our newsletter electronically, rather than in print form?</p>		<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>	
Date (dd/mm/yy)		Signature	
Membership Officer Only	Name	Zahlschein	Cash
			Date