

Soroptimist International of Oak Harbor

MEMBERSHIP APPLICATION

Name _____

Home Address _____

City, State, Zip _____

Home Phone _____ Cell Phone _____

Email _____

Employer _____

Title/Position _____

Business Address _____

City, State, Zip _____

Business Phone _____ Business Fax _____

How did you learn about Soroptimist? _____

Date

Signature

Please return to: **Marilee Paddock**
mdpaddock@gmail.com