

## SNOMOMS MEMBERSHIP FORM

<b>Membership year is from June 1<sup>st</sup> to May 31<sup>st</sup> Dues: \$30.00 per year</b>	Mail completed form and dues (check to SNOMOMS) to: SNOMOMS Membership 914 164 <sup>th</sup> ST SE, #364 Mill Creek, WA 98012 <b>For questions: <a href="mailto:clubinfo@snomoms.org">clubinfo@snomoms.org</a></b>
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<b>Your Name:</b>	<b>Today's Date</b>
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**Get Involved!** I am interested in helping with the following club activities (circle all that interest you):

- |                           |                   |                  |                                    |
|---------------------------|-------------------|------------------|------------------------------------|
| Membership                | Website           | Adult Socials    | 1 <sup>st</sup> Year Parents Group |
| Publicity                 | Family Outings    | Maternity Closet | Playgroups                         |
| Benevolence               | Outreach Programs | Preemie Closet   | Welcome Committee                  |
| Clothing & Equipment Sale | Helping Hands     | Lending Library  |                                    |

New Member or Changes for existing member			(Renewing members with no changes may leave blank)
<b>Address:</b>		Your Birthday:	
<b>City:</b>	State:	Zip:	Your Occupation:
<b>Phone Number: (including area code)</b>	Cell Phone:		Spouse's/Partner's Name:
<b>Email Address: ** (Club's primary method of communication)**</b>			Spouse's/Partner's Occupation:

### MULTIPLES:

Names	Type---Twins, Triplets, etc	Birth date(s) or due dates	Identical, fraternal or unknown	Boy(s) or Girl(s)

### SINGLETONS:

Name(s)	Birth or due date(s)	Boy(s) or Girl(s)

### MEMBER OF OTHER CLUBS?

	YES	List Primary Club?
<b>SNOMOMS</b>		
<b>EMOMS</b>		
<b>HLTMOTC</b>		
<b>SNFOM</b>		
<b>WPOM</b>		

--Club Use Only--		Information Sent Newsletters	Weekly Lifesaver	Events attended before joining	Membership Type
<b>Date Contacted</b>	<b>Date Joined:</b>	1 2 3	1 2 3 4 5 1 2 3 4 5		Paid Scholarship Lifetime