SNOMOMS MEMBERSHIP FORM

Membership year is from June 1st to May 31st **Dues: $30.00 per year**	**Mail completed form and dues (checks to SNOMOMS) to:** SNOMOMS Membership P.O. BOX 914 164th ST SE , # 364 Mill Creek, WA 98012 **for questions:** clubinfo@snomoms.org

Your Name:	**Today's Date**

Would you like to have a Big Sister? Yes or No **Would you like to volunteer to be a Big Sister?** Yes or No

Get Involved! *I am interested in helping with the following club activities (circle all that interest you):*

Membership	Website	Big Sister Program	1st Year Parents Group
Publicity	Family Outings	Maternity Closet	Playgroups
Benevolence	Outreach Programs	Preemie Closet	Adult Socials
Clothing & Equipment Sale	Helping Hands	Lending Library	

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

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

Check out our new website at www.snomoms.org

updated 8/13/06