



MEMBERSHIP APPLICATION AND RENEWAL

(Mail to)

FEDERALLY EMPLOYED WOMEN

P.O. BOX 75551

BALTIMORE, MD 21275

Please Print Legibly

Membership ID _____

First Name: _____ Last Name: _____

Address 1: _____

Address 2: _____

City: _____ State _____ Zip _____

Daytime Phone: _____ Email (home): _____

Evening Phone: _____ Email (work): _____

Fax: _____

Employer:

Private Industry: Federal Government: Local Government: Retired:

Other (Explain): State Government: Unemployed:

Grade (check):

- GS 1-4 GS 13-15
- GS 5-8 GS 16+
- GS 9-12 Military

FWP/EEO (check):

- FWP Full-Time
- FWP Part-Time
- EEO
- Other FWP/EEO
- Not Applicable

DEMOGRAPHICS

Gender: Male Female

RACE/NATIONALITY:

- American Indian Hispanic
- Asian/Pacific Caucasian
- Black Other

Job Series: _____

Service Computation Date: _____

PAYMENT: NATIONAL (\$45) CHECK # _____

I wish to join the _____ Chapter. **(Chapter Selection is Required)**

Referred/Recruited By (one name only): _____

Recruitment Event (if applicable): _____

ABOUT THE ORGANIZATION:

FEW is comprised of Chapters throughout the world. Membership is open to all Federal and D.C. government employees and to any other person supporting the goals and objectives of FEW. More information about the organization is posted on the FEW website: <http://www.few.org>.

****Please note that you may also Join FEW Online at <http://www.few.org> ****

Annual National membership dues are \$45 for Chapter members. Eligibility for Chapter membership is contingent on National membership.

* No refunds will be made upon the acceptance and processing of a membership application.

** Contributions or gifts to FEW are not deductible as charitable contributions for federal income tax purposes.