



This membership application should be completed and mailed to:

The Women's Club of Chatham, Membership Chair
PO Box 463, Chatham, MA 02633

A \$30 check for the first year's dues should accompany this application.

Date: _____

Name: _____

Address: _____

Email: _____

Phone: _____

Spouse/Partner name _____

Referred By: _____

Interested in: (Check all that apply)

American Heritage Epicurean Cultural Literature

Outreach

Your hobbies and other interests:

We look forward to meeting you.
Please feel free to copy and share with a friend.