



Whispering Winds Women's Auxiliary ~ Membership Form

I am a: New Member New Member Paid at Retreat Returning Member

Name: _____

Address: _____

City/State/Zip: _____

Hm. Phone: _____ Cell: _____

Email Addr: _____

Parish: _____

Active Membership, paid annually \$ 15.00

(Participation in one or more committees required - *Please select your committee choice(s) below*)

Sustaining Membership, paid annually\$ 25.00

(Financially supportive with no committee membership required)

Life Membership, 1-time payment.....\$ 175.00 **Previously Paid:**

Best way to contact you? **Email:** **Phone:**

I prefer bi-monthly newsletter delivery via: **Email:** **Postal Mail:**

Place checkmark next to your committee preference(s)

- Historian/Photographer (Take photos at events)
- Hospitality (Assist with food/decor for gatherings)
- Membership (Help recruit at events)
- Spirituality (Participate in planning spiritual events, annual retreat)
- Ways and Means (Help with fundraising)
- Other _____

Checks payable to WWWA, mail to: Whispering Winds Women's Auxiliary
c/o Ellen Maloney
6438 Radio Drive
San Diego, CA 92114