



GFWC New Tampa
JUNIOR
WOMAN'S CLUB

2017-2018 GFWC NTJWC Provisional Class Application

Name: _____

DOB: _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____

Spouse/Significant Other Name: _____

Home#: _____ Cell#: _____

Occupation: _____ Employer: _____

Interests (hobbies, special talents, etc.): _____

Children's Names & Ages: _____

How did you hear about us? _____

Please complete this application and return it with your check for membership dues (\$90) to GFWC New Tampa Junior Woman's Club, P.O. Box 46183, Tampa, FL 33646. Please make checks payable to **New Tampa Junior Woman's Club**.

Please be sure to "Like" us on Facebook at GFWC New Tampa Junior Woman's Club and visit our website, www.GFWCNewTampaJuniors.org.

If you have any questions, please email **Melanie Otte** at president@gfwcnewtampajuniors.org. Thank you!