

**Women's Club of East Granby**  
Membership Application Form



Date of Application: \_\_\_\_\_

Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Birthday (Month/Day) : \_\_\_\_/\_\_\_\_

Are you a returning member? (please circle one) Yes or No

If yes, how long have you been a member? \_\_\_\_\_

Areas of interest (check all that apply):

\_\_\_\_ 5k Ridge Run    \_\_\_\_ Empty Bowls    \_\_\_\_ Senior Lunch    \_\_\_\_ Winter Wonderland

\_\_\_\_ Social Activities    \_\_\_\_ Fundraising Committee

If you have questions about becoming a member of WCEG, please contact:  
Laura Namnoun ([lnamnoun@gmail.com](mailto:lnamnoun@gmail.com)) or Shirley Woods ([shirleywoods@cox.net](mailto:shirleywoods@cox.net)).

Please mail this form along with the \$30 annual membership dues to WCEG, P.O. Box 30,  
East Granby, CT 06026, or you can bring it our next meeting.