**AAUW – Erie Branch, Inc. New Member Enrollment Form**

**AAUW is open to anyone who has earned an Associate or higher degree from an accredited institution, college or university in the U.S. or from a foreign institution.**

**Please fill out this form, enclose a check made out to AAUW Erie Branch, Inc. $107.00. Mail to: AAUW Erie Branch, Inc., P.O. Box 9264, Erie, Pa. 16505. Please fill in all information requested.** (Will be used for the listings in the Yearbook, the Branch and the National Rosters.)

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

**Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**University/College Degree Field of Study**

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**Short Bio: Please tell us about yourself, your life, work, hobbies and interests.** (Will be used to introduce you to our membership in the next issue of our monthly newsletter, the Pressible. May be edited for space.)