



YWCA Membership Application

Member ID

Elmira & The Twin Tiers

Last Name First Name Middle Initial Gender Date of Birth Home Phone Cell Phone Marital status

Street City State ZipCode Email Address

Yes Would you like to receive our E-Newsletter?

Employer Name Employer Address Work Phone Job Title

Spouse's Last Name First Name Middle Initial Gender Date of Birth Cell Phone Email Address

Spouse's Employer Employer Address Work Phone Job Title

Emergency Contact Name Home Phone Other Phone Relationship

Child(rens) Information Name	Date of Birth	Gender	School
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Personal Information

The YWCA collects this information for United wayand other funding allocations. This information is not reported on an individual basis.

EthnicBackground:

African American	Hispanic
Asian	Native American
Caucasian	Other:

Annual Household Income:

Up to \$4,999	\$25-\$49,999	Would you interested in volunteering?
\$5-\$9,999	\$50-\$74,999	Yes No
\$10-\$14,999	\$75-\$99,999	In what area?
\$15-\$19,999	\$100-\$149,999	Program
\$20-\$24,999	\$150,000 +	Event
		Fundraising

How did you hear about the YWCA?

Website	Social Media (Facebook, twiter, Youtube, etc)		
World-of-mouth	Flyer	News Paper	Tv Advertisement
Radio Advertisement	Other:		

I agree to follow and abide by the YWCA Rulles and regulations that are designed for the safety and enjoyment of all members. I understand that participation with YWCA membership and programing is a privledge and theYWCA has the right to revoke this privledge as necessary.

Signature: _____ Date: _____

Membership Type	Join Date	Method of Payment
		Annual
Receipt Number	Staff Initials	Assistance
		Amount:
		Cash Check
		Debit/Credit

