



SOROPTIMIST
Best for Women

Soroptimist International of Greater North Kitsap (SIGNK)
PO Box 1594
Poulsbo, WA 98370
www.signk.org

Date _____

Membership Application

*Name _____

Home address _____

*Phones (h/w/c) _____

*Email _____ *Birthdate _____

Current or previous occupation _____

Current employer or business, if applicable _____

How did you hear about Soroptimist?

Why are you interested in joining our club?

What special skills or interests do you bring to the club?

Signature _____

Please return this form along with your dues check to your sponsor or Friend Committee Chair.

**Required fields for SI records.*

From time to time, the club will take photographs of our activities and post on our website and social media. As a member of SIGNK, and by signing this form, you consent to allow your image to be among those potentially shared.