

# WNBA/Washington • Membership Application • 2018–2019

## Personal Information *(Please type or print)*

Renewing member (see next line)     New Member  
 Contact info has not changed     Changes are noted below  
Name: \_\_\_\_\_  
HOME Address: \_\_\_\_\_  
City, State, ZIP: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail: \_\_\_\_\_

Employer: \_\_\_\_\_  
Position/Title: \_\_\_\_\_  
OFFICE Address: \_\_\_\_\_  
City, State, ZIP: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Web Site: \_\_\_\_\_

**Send mail to my:**     Home     Office    **Please list my:**     Home     Office    address in the membership directory

- WNBA/National has my permission to include the address indicated above in a password-protected, members-only directory on www.wnba-books.org.     Yes     No
- WNBA/Washington has my permission to share my address (not phone, fax, or e-mail) with similar literary or professional groups.     Yes     No

## Age Range *Please select your age range. Only aggregated information is passed along to help with potential WNBA sponsorships.*

under 25     26–35     36–45     46–55     56–65     66+

## Volunteering *Please check the areas in which you would be willing to volunteer:*

newsletter     membership     programs     publicity     service     mailings     other \_\_\_\_\_

I am willing to help develop a program for the current year on (topic): \_\_\_\_\_

I would be interested in attending a program on (topic): \_\_\_\_\_

My office can offer meeting space for a WNBA program (for 30 to 50 people) at: \_\_\_\_\_

## Networking *To be listed in the Networking section of our Chapter Membership Directory, please indicate the categories that best describe your work or interests.*

- |  |  |  |   |
|--|--|--|---|
| <input type="radio"/> administration                   | <input type="radio"/> desktop publishing           | <input type="radio"/> memoir writing             | <input type="radio"/> technical writer/editor |
| <input type="radio"/> art/graphic design               | <input type="radio"/> editor                       | <input type="radio"/> poetry writing             | <input type="radio"/> translation             |
| <input type="radio"/> association (professional/trade) | <input type="radio"/> educator/education           | <input type="radio"/> production                 | <input type="radio"/> training                |
| <input type="radio"/> author/writer                    | <input type="radio"/> exhibitions (library/museum) | <input type="radio"/> proofreader                | <input type="radio"/> web design              |
| <input type="radio"/> bookselling                      | <input type="radio"/> food writing                 | <input type="radio"/> proposal writer/editor     | <input type="radio"/> other (specify): _____  |
| <input type="radio"/> blogging                         | <input type="radio"/> freelance editor             | <input type="radio"/> publicity/public relations | _____   |
| <input type="radio"/> children's literature            | <input type="radio"/> freelance writer             | <input type="radio"/> publishing                 | _____   |
| <input type="radio"/> community service                | <input type="radio"/> librarian                    | <input type="radio"/> research                   | _____   |
| <input type="radio"/> creative writer                  | <input type="radio"/> literary agent               | <input type="radio"/> sales/marketing            |   |

## Authors *Please list your book title(s), publisher, and price on the reverse side. (Renewing members, please list only books published in the past year.)*

## Membership Fee *The 2018–2019\* membership dues are as follows:*

Regular/Network\*\* \$48     Student/Retiree \$35     Sponsor† \$100

Check enclosed for \$ \_\_\_\_\_ (payable to Women's National Book Association)‡

Sponsoring Members: I would like to receive the publicity options described in the box to the right.     Yes     No

Signature: \_\_\_\_\_

Today's Date: \_\_\_\_\_

Please mail your check and completed form to:  
Majeedah Johnson/WNBA  
13922 Valleyfield Drive, Silver Spring, MD 20906

\* The membership year runs from June 1 through May 31.

† Sponsoring Membership allows individuals and local organizations to make an additional annual contribution beyond Regular Membership dues. In return, WNBA lists Sponsoring Members on the chapter's website, in the bimonthly chapter newsletter (**Signature**), and at WNBA program registration tables. Sponsoring Members may also display their business cards and/or brochures at each of our programs.

\*\* If you're more than fifty miles from the nearest chapter city, you may choose a Network Membership and connect it with the chapter of your choice.

‡ Membership fees may be tax-deductible as a professional expense. Also, check whether your employer would cover the fee as a professional development expense.

**Thank you for supporting WNBA!**