



Soroptimist International of La Mesa  
PO Box 637, La Mesa, CA 91944

SOROPTIMIST  
Best for Women

## Personal Data Form - Membership Application

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

Spouse/Significant Other: \_\_\_\_\_

Company: \_\_\_\_\_

Nature of Business: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Pager: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

E-Mail: \_\_\_\_\_

Birthday: \_\_\_\_\_ Preferred Mailing Address: Home \_\_\_ Work \_\_\_

Sponsoring Member: \_\_\_\_\_

Personal Interest: (hobbies, favorite color, food, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FINANCIAL OBLIGATION:** NEW MEMBER FEE (including dues and current quarterly assessment)

If Joining	<b>July 1 - December 31</b>	<b>\$175.00</b>
	<b>January 1 - June 30</b>	<b>\$150.00</b>

Quarterly Assessments: \$100.00 (billed July 1, October 1, January 1 and April 1)  
(includes yearly dues and breakfast)

**Club Use:**

Classification # \_\_\_\_\_ Description: \_\_\_\_\_

Date Submitted with Dues: \_\_\_\_\_ Inducted: \_\_\_\_\_

Total Paid: \$ \_\_\_\_\_ Member # \_\_\_\_\_

Copies to: President, Treasurer (with Payment), Membership Chair, Roster Chair