



SOROPTIMIST
Best for Women®

SOROPTIMIST INTERNATIONAL OF PORTLAND

Application for Membership

Date _____

Name _____

Home Address _____

City/State/Zip _____

Home Phone _____ Cell Phone _____

Email _____ Birthday (Yr optional) _____

Business/Title _____ Retired _____

Business Address _____

City/State/Zip _____

Business Phone _____ Fax _____

Email _____

Preferred email: Business _____ Personal _____ Referred By _____

Emergency Contact _____ Relationship _____ Phone _____

Areas of Interest: _____

Fees: One-time new member fee \$35; Annual dues \$125; New member prorated dues during Jan-June \$62.50

Mail or email completed form to: Soroptimist International of Portland

P. O. Box 16148, Portland, OR 97292

Club Email: siportland@soroptimist.net

Club Website: www.soroptimistpdx.org

Contact: Jane Lathrop (503) 805-5966 jane.lathrop@comcast.net

CLUB USE ONLY: ID# _____	Amount Paid \$ _____	New Member Fee \$ _____	SIA Input on _____	SIA Fee Pd _____
NWR Fee Pd _____	Order Name Tag _____	Mentor Name _____	New Member Book _____	Induction Date _____
Notify Sunshine for flowers _____	Update & Send Roster _____	Add to NWR Woman _____		
<u>Contact List:</u> President _____	Membership Chair _____	Treasurer _____	Roster Editor _____	Benson Contact _____
Chat _____	Sunshine _____	Website Master _____	All Members _____	
v. 7.2018				