

*Improving the lives of
women and girls,
in local communities
and throughout the
world.*



*SI Alpine
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**Soroptimist International of Alpine
PO Box 1053, Alpine CA 91903**

Personal Data Form – Membership Application

Date: _____ Name: _____

Company: _____

Nature of Business: _____

Business website: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Cell Phone: _____ Work Phone: _____

E-mail: _____

Birthday (mm/dd): _____

Sponsoring Member: _____

Personal Interests/Talents: (hobbies, favorite color, food, etc.) _____

Have you belonged to another Soroptimist Club? If so, when and where _____

Do you belong to other Clubs? (Lions Club, Rotary, etc) _____

Annual dues are: _____ New member administration fee (one time fee): _____

Payment amount (check made out to SIA): _____

Date Paid: _____

Induction Date: _____