

Celebrating our 37th anniversary

Wisconsin Women of Color Network Annual Membership Form

Name: _____
Occupation/Job Title: _____
Preferred Address: _____
Email Address: _____
Home Phone: _____ Best time to call: _____
Membership Types:
_____ Individual
_____ Organization/Corporate
_____ Lifetime
New _____ Renewal _____ Amount Enclosed: \$ _____

**Please make check payable to “WWOCN” and mail with completed
Form to: WWOCN, P.O. Box 2337, Madison, WI 53701-2337**

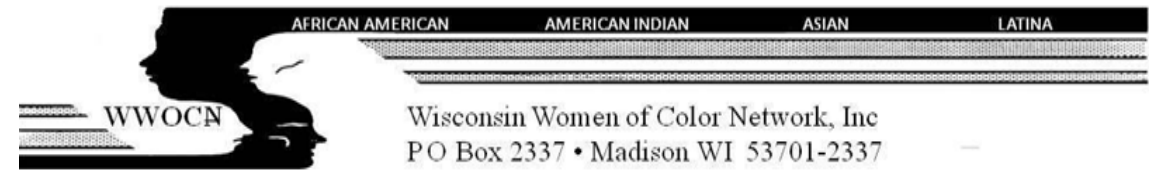
Questions contact: wwocnagc@gmail.com

The Wisconsin Women of Color Network (WWOCN), through statewide collaboration, assists women of color in accessing educational resources, healthcare and social services to promote leadership, cross-cultural awareness, and spiritual and economic well-being, thus, enriching the lives of women of color, their families and their communities.

Annual membership fee is valid from January 1, 2020 to December 31, 2020.

New and Renewal Membership Dues:

\$25 per year - Individual
\$35 per year - Organization or Business
\$200 one-time payment Lifetime Membership
(Installment payments may be arranged).



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