



Application for Social Membership

I apply for social membership in Woman's Life Insurance Society. I will comply with the Articles of Incorporation and Laws of the Society, as amended. I will advance the welfare and progress of the Society and its principles of connection, community and cause.

Information about the Applicant:

Name of Applicant _____

Address _____ City _____ State/Zip Code _____

Date of Birth (Month/Day/Year) _____ Daytime Phone Number _____

Email Address _____

Signature of Applicant _____ Date Signed _____

If joining an existing chapter:

Chapter Number _____ State _____ Location _____ Applicant recommended by (Signatures of two chapter members):

_____ Date _____ _____ Date _____

Woman's Life Insurance Society Chapter _____ (Number) _____ (State) does hereby accept the above applicant as a member of said Chapter.

Signatures of Two Chapter Officers: _____ Date _____ _____ Date _____

If joining as a charter member of a new chapter:

Home Office Authorization by: _____ Date: _____

Chapter officers and members may not accept dues payments and should not have access to a member's payment information. Dues should be paid by check or credit card. The new member should complete the credit card information section or attach a check payable to Woman's Life and mail the completed application and payment direct to Woman's Life or give it personally to a Woman's Life representative. Dues are not deductible as a charitable contribution.

Credit Card Payment Authorization Form

Credit Cardholder's Name As It Appears On Credit Card _____ Daytime Phone _____

Credit Cardholder's Billing Address (Number/Street) _____ City _____ State Zip Code _____

Amount to be Charged: \$50.00 Credit Card Type: Visa[®] MasterCard[®] Discover[®]

Credit Card #(16 digits): _____ Expiration Date: _____ / _____

C.I.D. _____ (3 digit # on back of card - This number will not be retained by Woman's Life Insurance Society after processing)

Credit Cardholder's Signature _____ Date Signed _____

If you have any questions, please call 800.521.9292 or 810.985.5191 Ext. 168.

Note: Please use care to complete all of the necessary items on this form and sign and date it. The form cannot be processed if it is not complete.