



Jackson Area Business and Professional Women / TN

Membership Application

www.bpwn.org

www.jacksonareabpw.com

Date:

Personal Information

Because every working woman is a business woman!

Name: _____

Company Name: _____

Company Address: _____

City, State, Zip+4: _____

Home Address: _____

City, State, Zip+4: _____

Preferred Mailing Address: Home Work

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Preferred Email Address: Personal Work

Work Email: _____

Personal Email: _____

Total

Member of Local (MOL) _____ State Dues: \$50 Local Dues: \$40

Senior Member of Local (SMOL) _____ State Dues: \$40 Local Dues: \$40

Student Member of Local (SOL) _____ State Dues: \$15 Local Dues: \$40

If a BPW/TN Member introduced you to BPW please list them.

Or bring to the next meeting!

**Make Checks Payable to
JABPW**

**Mail to:
JABPW
PO Box 3643
Jackson TN 38303-3643**