

**University Women's Club of Montreal, Inc.**  
**Club des Femmes Universitaires de Montréal, Inc.**

1200 Atwater Avenue, Westmount, QC H3Z 1X4

**APPLICATION FOR MEMBERSHIP**

Membership in UWCM includes club membership in the Canadian Federation of University Women, an affiliate of the Graduate Women International

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone \_\_\_\_\_ (h) \_\_\_\_\_ (w) \_\_\_\_\_ (cell)

E-mail \_\_\_\_\_

How did you learn about UWCM? \_\_\_\_\_

Interests 1. \_\_\_\_\_ 3. \_\_\_\_\_  
2. \_\_\_\_\_ 4. \_\_\_\_\_

Profession \_\_\_\_\_

Current Work (paid or unpaid) \_\_\_\_\_  
\_\_\_\_\_

University Degree	Year	University Name	Name under which Obtained
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Have you ever been a member of the CFUW or GWI? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, Club names/dates \_\_\_\_\_  
\_\_\_\_\_

Please list additional expertise/involvement (Boards/school/volunteer/community, etc.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Members consent to having their name, address, telephone number and other contact information supplied in this application published in the Club Directory. We do not consider this private information but we do ask that members restrict their use of the directory to club matters and personal non-commercial use.

Signature \_\_\_\_\_

Date \_\_\_\_\_