

SISTER CITIES ASSOCIATION OF KENOSHA, WISCONSIN, INCORPORATED
General Membership Application

Name: _____

Address: _____

City _____ State _____ Zip _____

Phone (H) () _____

Phone (W) _____

Occupation/Title _____

Employer _____

Date of Birth ____ / ____ / ____ (optional)

TYPES OF MEMBERSHIP

_____ Single/Adult - \$10 (18 & older) _____ Couple - \$20

_____ Youth - \$5 (under 18) _____ Family - \$25

On which of the following committees would you like to serve? Select three and put them in order of priority. The Association will make every effort to accommodate your request, but reserves the right to make appointments in the best interest of the corporation.

_____ Douai, France _____ Wolfenbuttel, Germany

_____ Cosenza, Italy _____ Quezon City, Phillipines

_____ Membership/Public Relations _____ Fundraising/Budget

_____ Youth Exchange _____ Trade & Commerce/Professional & Technical

Do you speak or understand a foreign language? _____ Y _____ N

Please list language and degree of fluency _____

Applicant Signature _____ Date _____