



SOROPTIMIST  
Best for Women

# Soroptimist International of Vista & North County Inland

www.soroptimistvista.org  
www.liveyourdream.org  
P.O. Box 382  
Vista, California 92085-0382

## 2016/2017 NEW MEMBERSHIP APPLICATION

*Soroptimist's mission is to improve the lives of women and girls through programs leading to social and economic empowerment.*

Name: \_\_\_\_\_

Business: \_\_\_\_\_

Address : \_\_\_\_\_

\_\_\_\_\_

Position: \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_

Which is your preferred mailing address? Business or Home

Phone: (H) \_\_\_\_\_ (B) \_\_\_\_\_

(cell) \_\_\_\_\_ (fax) \_\_\_\_\_

Birthday: \_\_\_\_\_ (e-mail) \_\_\_\_\_

Spouse's name: \_\_\_\_\_

Sponsor/referral: \_\_\_\_\_

\_\_\_\_\_

(signature)

(date)

Thank you for your interest in Soroptimist International of Vista & North County Inland.

If you are a woman who wishes to improve the lives of women and girls in an atmosphere of support, friendship and fun, then joining Soroptimist may be right for you. Please complete this form and return it along with your check for \$175\* payable to SI Vista & North County Inland.

(\*fees are prorated bi-annually ask Chairperson for current amount due)

Payment Amount: \$ \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_ Check #: \_\_\_\_\_

*Questions contact Membership Director Karen Del Bene@ 760.717.0873  
e-mail questions to: soroptimistinternationalvista@gmail.com  
To learn more about Soroptimist: www.soroptimist.org or www.liveyourdream.org*



SOROPTIMIST  
Best for Women

**Soroptimist International of Vista**

**www.soroptimistvista.org**

P.O. Box 382

Vista, California 92085-0382

**NEW MEMBERSHIP APPLICATION Worksheet**

***Our Mission: Improving the lives of women and girls, in local communities and throughout the world.***

Annual Membership Dues: \$150.00 (note: our fiscal year runs from July 1 through June 30.)

- July 1, 2016 - December 31, 2016 \$150.00 \_\_\_\_\_
- January 1, 2017 - June 1, 2017 \$ 75.00 \_\_\_\_\_

One Time initiation (New member) fee: \$ 25.00

**Total due:** \*\$ \_\_\_\_\_

**Make your check for payable to SI Vista & North County Inland and submit your application and applicable fees to:**

**Soroptimist International of Vista & North County Inland**

Post Office Box 382

Vista, California 92085

**For office use only ....**

**Member Application Received with payment \$ \_\_\_\_\_ ck# \_\_\_\_\_**

**Member Induction date: \_\_\_\_\_**

**Member Sponsor: \_\_\_\_\_ Buddy: \_\_\_\_\_**

**New member 5008 filed with SIA \_\_\_\_\_ Date submitted: \_\_\_\_\_**

**New member 5008 copy filed with DCR \_\_\_\_\_ Date submitted: \_\_\_\_\_**

**Payment payable to: SIA Amount \$ \_\_\_\_\_ ck# \_\_\_\_\_**

**Payment payable to: DCR Amount \$ \_\_\_\_\_ ck# \_\_\_\_\_**