



## California Writers Club Tri-Valley Branch

### Membership Application

Please print all information legibly and mail to:  
**PO Box 10953 / 4682 Chabot Dr. #10953**  
**Pleasanton, CA 94588**

Name		Home phone	
Address		Cell/Alt	
City		Fax	
State		E-mail	
Zip Code			

We share your name, phone number, and e-mail ONLY with required State and Tri-Valley Board members.

<b>Previous/current writing experience. Please mail up to three samples, five pages maximum.</b> (If no experience, that's okay as long as you have a desire to start writing and get published)		
<b>Genre(1)</b>	<b>Status(2)</b>	<b>Brief description</b>

(1) **F**-Fiction, **NF**-Non-Fiction, **A**-Articles, **C**-Children, **E**-Editing, **FTS**-Film/TV/Stage, **J**-Journalism, **P**-Poetry, **SS**-Short Story; **YA**-Young Adult, **SP**-Self-publishing, **O**-Online publishing/e-Publishing.  
 (2) **P**-Published (include date), **UC**-under contract, or **IP**-in progress (IP includes work that you have written or are writing and may or may not publish in the future).

Payment information	Amount enclosed
Dues-full year (\$65) July 1 to June 30 *	\$
Dues-half year (\$42.50) After January 1	\$
Check number	

\*Dual \$20, Student (ages 14-22) \$10

Who referred you to CWC Tri-Valley Branch? \_\_\_\_\_

<b>CWC often needs volunteers for a variety of support efforts. Please indicate your interests.</b>					
	Board Member		Programs		Membership
					Critique Coordinator
					Website
	Publicity		Newsletter		Historian
					Door Prize Tickets
					Photographer

Do you have personal automobile insurance (required for CWC volunteers)? \_\_\_\_ Yes \_\_\_\_ No

\_\_\_\_\_  
Your signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Approval Signature (Membership Chair)

\_\_\_\_\_  
Status

\_\_\_\_\_  
Date