



National Organization for Women/ NYC

The Founding Chapter

150 W. 28th St., Suite 304, New York, NY 10001 Phone 212-627-9895 Fax 212-627-9861
VISIT OUR WEBSITE AT: www.nownyc.org

Membership Registration Form (Chapter Code: NY0360)

Name _____

Address _____ City _____ State _____ Zip _____

Email address _____ Cell _____ Check this box if you would like to receive emails on important issues and legislation, and to be notified about upcoming events.
Phone (Day) _____ Phone (Evening) _____

YES! I WANT TO JOIN THE NEW YORK CITY CHAPTER OF NOW!

- \$45 General Membership
- \$60 Friend of NOW-NYC
 - As a supporting member, check here to receive a gift subscription to Ms. Magazine.
 - Check here if you'd like all of your dollars to support NOW-NYC.
- \$85 Women's Rights Advocate
- \$150 Feminist Activist
- \$250 Feminist Leader
- \$500 Betty Friedan Visionary
- \$1000 Lifetime Membership
- Student/Sliding Scale (\$44-\$15) \$ _____
- \$ _____ Additional Contribution

I have enclosed \$ _____ with this membership form.

I have enclosed **CASH** for \$ _____

I have enclosed a **CHECK** for \$ _____

(Make **CHECK** payable to NOW-NYC and mail with this form to:
NOW-NYC, 150 W. 28th St., Suite 304, NY, NY 10001)

I would like to **CHARGE** my membership: VISA MC AmEx Discover

Amount \$ _____

I WANT TO BE A NOW-NYC EQUALITY PARTNER

Please charge \$ _____ each month to my credit card.

Credit Card Number _____ EXP. DATE ____/____

Billing Name _____

Billing Street Address _____

Billing City _____ State _____ Zip _____

Signature _____

Please, fill out the questionnaire on the back of this form.

FOR OFFICE USE ONLY

Date Received In Office: _____

Date Processed To National: _____

Date Added to Action Alert Network: _____

Date Welcome Letter Sent: _____

Ms. Magazine Requested (if applicable): _____