AFFILIATE CLUB INFORMATION FORM (DATA BLANK)
GFWC California Federation of Women's Clubs

Use the interactive Club Information Form on the CFWC website or this form **MUST BE TYPED**
Date Submitted_____

_____ _____ _____
LEGAL NAME OF AFFILIATE CLUB District Name Area

Incoming President _____

Address_____City_____Zip_____

Phone (Hm) _____ (Cell) _____ E-mail_____

Incoming Treasurer _____

Address_____City_____Zip_____

Phone (Hm) _____ (Cell) _____ E-mail_____

Club Mailing Address_____

Day and Time of Meeting (i.e. 1st Friday at 11:00 a.m.)_____

We have checked the included information for accuracy.
Required Signatures:
President (Outgoing) _____ (Incoming) _____

AFFILIATE GROUP PRESIDENTS:

1. Information reported on the Affiliate Club Information Form will be printed in the CFWC Yearbook.
2. **Send 5 copies of the Affiliate Club Information Form** with a check for the fee (based on number of Federation members) to the District Financial Officer on or before the date required.

CFWC Fee for 25 members or fewer (Number of Members) $30.00 = $ _____

CFWC Fee for 26 members or more (Number of Members) $45.00 = $ _____

Amount to be sent to DISTRICT FINANCIAL OFFICER **$**_____

DISTRICT PRESIDENTS:
Send one completed Remittance Form, one Check payable to CFWC and **3 copies of Club Information Form (Data Blank)** to the CFWC Financial Secretary on or before **May 15th**.

Annual dues are due on or before **May 15th** to CFWC and are delinquent **June 15th**. If dues are not paid before **July 31st**, club will dropped from membership.