

New UNWLA Branch Application Documents



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LETTER OF REQUEST

From:			
То:			
Dear U	NWLA National Executive Commit	tee,	



NEW BRANCH MEMBERS ROSTER

#	Last Name	First Name	Прізвище	Імя	Street Address	City	State	Zip	Email	Phone
1										
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NEW BRANCH MEMBER APPLICATION



Ukrainian National Women's League of America INDIVIDUAL APPLICATION FOR MEMBERSHIP

Last Name:	First Name:	MI:			
Street Address, Apt.					
City:	State:	ZIP:			
Home Telephone:	Cell Phone:				
Work Phone:	E-mail:				
☐ I am interested in becoming part of a new Branch in my area. If accepted as a member of UNWLA, Inc. I pledge to abide by all its Bylaws and Policies and Procedures.					
Signature:		Date:			