

AMERICAN ASSOCIATION FOR WOMEN IN COMMUNITY COLLEGES Rowan College at South Jersey Chapter

APPLICATION FOR MEMBERSHIP 2024 - 2025 (7/1/2024-6/30/2025)

Name:		Date:		
Please select one of the follow				
Faculty/Staff	Administration	_Retiree	Alumni	Student
Title/Position:				
Department:				
Home Address:				
Phone numbers: Home:	Office:		Cell:	
Email Address:				
Please make your check payable to <i>Rowan College of South Jersey</i> and forward it along with this form, to Judy MacKenzie, CC107. <i>Annual Dues are due by April 30, 2024</i>				
Regular – Non-Student	Membership – \$30			
Retiree – Non-Student	Membership – \$20			
Student Membership –	\$10			
I would also like to spo	nsor a student member	ship this yea	ır (\$10)	
Optional: I am interested in serving on the following potential committee(s):				
Activity	Membership	Ma	arketing/Commu	nications
Scholarship	Philanthropy	Bo	oard Position	
I have enclosed a check in the	amount of \$			

For more information, please visit https://www.aawccnatl.org

Please note: Any returned checks will incur appropriate fees.