



**California Writers Club
Tri-Valley Branch
Membership Application**
Please print all information and mail to:
4682 Chabot Dr. #10953
Pleasanton, CA 94588



Name		Home phone	
Address		Cell/Alt	
City		E-mail	
State		Website / Blog	
Zip Code		FB / Twitter	

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

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

(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 Member \$25, Student (ages 14-22) \$10

Who referred you to CWC Tri-Valley Branch? _____

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

Please list special skills: _____
Do you have personal automobile insurance (required for CWC volunteers)? ____ Yes ____ No

Your signature Date

Approval Signature (Membership Chair) Status Date