

# Native American Women Warriors

## Membership Form

(Non-Veteran)



Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_ City/Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Marital Status:   \_\_\_ Single       \_\_\_ Married       \_\_\_ Divorced

Children/Ages \_\_\_\_\_

Tribal Affiliation \_\_\_\_\_ Enrolled Member \_\_\_ Yes \_\_\_ No

Current Employment \_\_\_ Full time \_\_\_ Part Time \_\_\_ Seasonal \_\_\_ Unemployed

What industry?

If unemployed, how long have you been unemployed?

Education:   \_\_\_ less than High School   \_\_\_ High School Grad   \_\_\_ Some College

              \_\_\_ Technical Certificate   \_\_\_ Bachelor's Degree

Please tell us your reasons for joining NAWW:

What is your interest in the NAWW group/organization?

What can you contribute to NAWW?

Are you willing to contribute to the Non-profit, in support or assistance?