

New Member/Updating Information/Reinstatement Form - Revised 09/27/2023

Dues Information: MOL: State Dues \$40 Local Dues: ______SOL: State Dues \$20 Local Dues: _____

Please print or type all information.

Member Type: (please circle)	Name:							State Dues		Local Dues		Total Dues
	Address:							\$		\$		\$
	City, State, Zip:						Pl	Please circle one: New Member Updating information Reinstatement				
Member of Local (MOL)												
Student of Local (SOL)	Employer:					Occupation/Position:						
	Phones Home:			Work:				Cell:				
	Birth Date/						Ne	New member recruited by:				
Member Type: (please circle) Member of Local (MOL) Student of Local (SOL)	Name:							State I	Dues	Local Dues	S	Total Dues
	Address:							\$		\$		\$
	City, State, Zip:						Pl	Please circle one: New Member Updating Information Reinstatement				
	Employer:					Occupation/Position:						
	Phones Home:				Work:			Cell:				
	Birth Dat	e/					New member recruited by:					
new member,	please co	ember Type" and new or renewing formplete all information requested contact with members. Please cor	d. This	ATTENTION: Please mail your check, payab BPW/OHIO to:		e to	Questions?		Total amount this page		\$	
information for a mailings.	accuracy. E	Errors can lead to non-receipt of n	Brenda Anders, Treasurer 557 Ross Rd SE Lancaster, OH 43130 Payments can be made online a www.bpwohio.org (only full dues payments).			Contact Brenda Anders BPW/OhioTreasurer at			Total amount for ALL pages submitted			
Local. Amounts of filled in above.	owed are a	ollected from each member for State the top of the form. Local dues show the form th				I)740-654-19 Treasurer@C	902 or e-ma OhioBPW.org	Note: There are no refunds on d		dues payments		
		nember dues as soon as possibl many forms as you need.	Local Organization Name:									
DI EVSE KEI	ED V DIIDI	LICATE COPY FOR YOUR RECOR	pne	Treasurer's Name:								
FLLAGE NEI	LI A DUPL	LIGATE COFT FOR TOUR RECOR	Treasurer's Email Address:									
				Treasurer's Daytime Phone Number:				Date:				