



**Durango/SW Colorado Branch New Member Registration**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Nickname \_\_\_\_\_ Birthday \_\_\_\_\_  
(month & day only)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (H) \_\_\_\_\_ Phone (W) \_\_\_\_\_

Phone (cell) \_\_\_\_\_

E-mail (H) \_\_\_\_\_ E-mail (W) \_\_\_\_\_

Undergraduate Degrees, Institution (name & location) and Year:

\_\_\_\_\_  
\_\_\_\_\_

Graduate Degrees, Institution (name & location) and Year:

\_\_\_\_\_  
\_\_\_\_\_

I would be interested in helping with (circle): Scholarships, Programs, Membership,  
Public Policy, Communications, Other: \_\_\_\_\_

**Annual dues: \$95 payable to Durango AAUW**  
**[Nat./State/Branch]: [\$72(\$69 tax deductible)/\$10/\$13]**

*Please return completed form with your check to:*

Sharon Powers

14 Salt Brush St.  
Durango, CO 81301

*d-AAUW 2024New member Registration form*