

COUNCIL OF CATHOLIC WOMEN
ST. CHARLES BORROMEIO CATHOLIC CHURCH
4001 Edgewater Drive * Orlando, Florida * 32804

The Council of Catholic Women is an organization to support, empower, and educate all Catholic women in spirituality, leadership and service.

Membership Form

Today's Date (Date joining CCW): _____

Name: _____ Spouse's Name: (if applicable): _____

Address: _____

Cell #: _____ Work: _____

Home #: _____ Birthday: _____/_____/_____

Email: _____

What is your preferred method of contact? _____

What is the best time of day to reach you? _____

Can you receive telephone calls at work? _____

What other ministries are you involved in? _____

Please indicate areas in which you would like to volunteer your service:

- | | |
|---|--|
| <input type="checkbox"/> Making telephone calls | <input type="checkbox"/> Serving at receptions, set-up |
| <input type="checkbox"/> Baking Goodies | <input type="checkbox"/> Serving coffee and donuts |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Flexible (if schedule allows) |

Please list any special talents you would like to share with CCW that may help our cause (examples: good with websites, great with excel, excellent baker, event planning experience)

Annual Membership dues are \$15. The CCW "year" is: May 1 – April 30.

Dues are due on MAY 1st of each year.

Please make checks payable to: St. Charles Borromeo CCW

Optional:

(Cash or Checks are accepted)

- Yes, I would like a blue CCW Nametag: \$8.00 each
 Yes, I would like a blue CCW Scarf worn for CCW special events: \$13.00 each
 Yes, I would like a blue CCW Face Mask: \$10.00 each

Return this form, dues, and other payments to:

Lisa Sibons, CCW Treasurer
2406 N. Rio Grande Ave.
Orlando, Florida 32804

Check # _____ Cash: _____ Amount Rec'd: _____ Rec'd by: _____