



## Medical University Women's Club

Sign Up Today!  New Member  Renewing Member

Name: \_\_\_\_\_  
(Title) (First) (MI) (Last)

College/Dept/Title \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail address: \_\_\_\_\_

I want to be notified of MUWC information by email: \_\_\_\_\_yes \_\_\_no

Spouse's Name: \_\_\_\_\_  
(Title) (First) (MI) (Last)

College/Dept/Title: \_\_\_\_\_

Check if interested in joining:

- Bridge  Lunch Bunch  Book Group  
 Mahjonn  Supper Club  Ravenel Bridge Walking

Check if interested in volunteering for:

- Regular Hospital Volunteer Position  Fundraising Committee  
 Posies for Patients  Teddy Bear Day  Roses for Commencement

Please complete this form and mail it with a check (*payable to MUWC*) for \$100 (*which is tax deductible*) to:

Terri DeVane, Corresponding Secretary  
5092 Chisolm Road  
Johns Island, SC 29455