



2010 Membership Application (Revised 03-02-10)

Pay as you go Membership

This membership allows you to attend any or all meetings at the Members price

Annual Membership Dues: \$90.00

Meeting Dues: Vary

All Inclusive Membership

This membership covers all meeting dues for 12 month period.

Multiple memberships are offered to corporations

1 All-inclusive Membership \$235

2 All-inclusive Memberships \$450

3 All-inclusive Memberships \$670

Specify Payment Method: Cash Check Invoice me/company_____

**Please complete all sections of the application.
(PRINT OR TYPE LEGIBLY)**

Former Member
 Former Student Member
 NEW Member

Pay-as-you go membership
 1 all-inclusive membership
 2 all-inclusive memberships
 3 all-inclusive memberships

Name: First _____ Middle Initial _____ Last _____

Employer Name _____ Your Title _____ Dept/Div. _____

Employer Address _____ City _____ State _____ Zip Code _____

Home Address _____ City _____ State _____ Zip Code _____

Send Mail to: Home Company

WiTT does not sell or rent its mailing list.

Business Phone: _____ Home Phone: _____ Fax: _____

Preferred E-Mail Address: _____

From time to time, WiTT receives special offers or information relating to women or technology professionals. Would you like to be included in the distribution of such information via e-mail? Yes No

I hereby apply for membership in WiTT. I agree to comply with the requirements of the Bylaws and Code of Ethics and all regulations adopted by Women in Technology of Tennessee. I agree to maintain the confidentiality of any and all proprietary information obtained through my membership in WiTT, and acknowledge such by my signature below. For a copy of the bylaws, please contact Theresa Markum.

Applicant's Signature _____ Date _____

How did you hear about WiTT? _____

Would you be interested in serving on a committee? Yes No If yes, what is your area of interest? _____

For questions regarding membership, please contact Emma Everett via e-mail at everett@teksystems.com or at (615) 424-2871.

Turn in application along with payment at any WiTT event, or mail to:

**Women in Technology of Tennessee
ATTN: Membership
330 Franklin Road, Suite 135A-538
Brentwood, TN 37027**



2010 Membership Application (Revised 03/02/10) - continued

Primary Member for second membership

Name: First _____ Middle Initial _____ Last _____

Employer Name _____ Your Title _____ Dept/Div. _____

Employer Address _____ City _____ State _____ Zip Code _____

Home Address _____ City _____ State _____ Zip Code _____

Business Phone: _____ Home Phone: _____ Fax: _____

Preferred E-Mail Address: _____

Primary Member for third membership

Name: First _____ Middle Initial _____ Last _____

Employer Name _____ Your Title _____ Dept/Div. _____

Employer Address _____ City _____ State _____ Zip Code _____

Home Address _____ City _____ State _____ Zip Code _____

Business Phone: _____ Home Phone: _____ Fax: _____

Preferred E-Mail Address: _____