

WGRI Membership Application

Date _____

Full Name _____

Address _____

City, State, Zip _____

Email _____

Contact Phone _____

Website/Blog _____

I want to learn:

I can teach:

I am interested in helping with:

Programs and speakers, Hospitality, Presenting a program, Demonstrating,
Mentoring

Publicity, Newsletter, Speaker, Website, Other (describe)

Mail with check for \$35.00, made out to WGRI to:

Treasurer, WGRI

Suzanne Hosier

13 Creighton St

Providence, RI. 02906