



**ZONTA CLUB
of Bowling Green Area**

Zonta Club of the Bowling Green Area
P.O. Box 745
Bowling Green, Ohio 43402

Membership Application

Application Date: _____

Name: _____

Business Title: _____

Business Name/Employer: _____

Business/Employer Address: _____
Street City State Zip

Business Phone: _____

Business Fax: _____

Home Address: _____
Street City State Zip

Home Phone: _____

Cell Phone: _____

Preferred E-mail Address: _____ home/work

Alternate E-mail Address: _____ home/work

Date of Birth: _____

Language Fluency: _____

Spouse/Significant Other's Name (if applicable): _____

Committee Preference: *please place an "X" to indicate choice*

- _____ Fundraising _____ Membership _____ Z Club _____ Scholarship
- _____ Program/Social _____ Public Relations _____ Nominating _____ United Nation
- _____ Status of Women/Service

For Office Use Only:		
Date Received:	Remittance (check number):	Amt:
Date Sent to District:		
Date Sent to International		