

Membership Application Form

Thank you for adding your voice to empower women by seeking to join our club and become part of the larger global community of Zonta International. Please submit the completed form to:

MEMBER	Member Type: ☐Club ☐ Reir	o member
First Name:		Last Name/Surname:
Address:		
City:		State/Province (if applicable):
Postal Code:		Country:
Home Telephone:		Mobile/Cell Phone:
Email:		Occupation/Title:
Date of Birth (DD/MM/YYYY) *Required for young professi		Gender: Female Male Other
☐ I was a Z Club / Golden ☐ ☐ I am a former Zonta Club	Z Club member (Please specify o	omen in Business Scholarship Young Women in Public Affairs Award club and country):
equality is a reality. Please I am committed and polices of Z documents which is a reality. Please	confirm: I to upholding the mission, object: Zonta International. Please email ch are currently located on the "n ent to the Zonta club to store the p	On members committed to securing a world where gender s and vision of Zonta International and I shall comply with the rules memberrecords@zonta.org if you wish to view the governing nember only" part of the website. personal membership information I have provided by applying for years, including photographs taken of me in connection with
•	undertake to renew or withdraw to sell, rent or disclose any mem	this consent on an annual basis. sber data information in my possession, to any third party.

Member Type		Dues (All levels)	
Club Member		IS\$103/US\$59*	
Young professionals (under 30)		JS\$59/US\$37*	
lease Note: Members joining from 1 De	cember – 31 May will pay annual renewal d	ues by 1 June for the following year.	
	ntians pay an additional US\$3. Membership	a. The new member / reinstatement fee is included in to is not complete until both this form and payment an	
PAYMENT			
Payment type	Where to submit	How to submit	
(Ex: Credit Card)			
(Ex: Check/Money Order)			
(Ex: Cash)			
	•	you learned about Zonta International. website Social media Other:	
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