

Date: \_\_\_\_\_

**Friends of American Writers**



**Friends of American Writers  
Membership Application  
Fawchicago.org**

Name \_\_\_\_\_ Spouse/Partner name \_\_\_\_\_

Preferred Listing Ms \_\_\_\_\_ Mrs. \_\_\_\_\_ Miss \_\_\_\_\_ Mr. \_\_\_\_\_ (Other) \_\_\_\_\_

Street Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Postal \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

I would like to receive the newsletter by: mail \_\_\_\_\_ email \_\_\_\_\_

**Kindly answer the following questions: (optional)**

1. Special interests \_\_\_\_\_

2. Other Club Memberships \_\_\_\_\_

3. Office held \_\_\_\_\_

4. Career experience \_\_\_\_\_

\_\_\_\_\_

5. Current member(s) in the club I know \_\_\_\_\_

Annual Dues (FAW fiscal year is May to April, with dues renewal in May of each year)

Payable to Friends of American Writers (FAW)

Full Year \$45.00  Jan to May \$20.00  Sustaining Club \$45.00

Signature \_\_\_\_\_

Please return to:

FAW Membership  
c/o Ida Hagman  
93 S. Park Blvd.  
Glen Ellyn, IL 60137