



American Association of University Women

AAUW – Austin (TX) Branch

Membership RENEWAL Information 2023-2024

Date of completion: ___/___/___

Please make checks payable to AAUW–Austin and mail check with completed form to:
Sharon Babot, AAUW Membership Co-VP, 110 Brins Way, Dripping Springs, TX 78620-2108

(Please mark status/\$ amount)

Dues: (All but \$3.00 of National dues is tax deductible.)

Branch Member (\$101.00 total – National - \$72; State - \$13; Branch - \$16) _____

(If Dual Member and primary branch is a different Texas branch, total due is \$13.00)

(If Dual Member and primary branch is outside of Texas, total due is \$29.00)

Paid Life Member (\$29.00 total – National - \$0; State - \$13; Branch - \$16) _____

(Paid Life Member – one-time payment of 20x National Dues – currently set at \$1,180.00)

Honorary Life Member (\$0 total – National - \$0; State - \$0; Branch - \$0) _____

(50 years of continuous AAUW membership – no dues charged)

Student of Non-AAUW C/U Members (undergraduate or degree-seeking graduate) _____

(Non-voting membership / \$26.81 Total -- National - \$18.81; State - \$1; Branch - \$7)

Students of AAUW C/U Members* (undergraduate or degree seeking graduate) _____

(Non-voting membership / \$8.00 Total - National - \$0; State - \$1; Branch - \$7)

AAUW FUND donation: 100% Tax Deductible

Unspecific donations will be used where needed most. \$ _____

Or write on check your mission preference: Economic Security, Leadership Initiatives, Education and Training or Governance and Sustainability.

LOCAL donation:

Austin Branch Operating Funds \$ _____

Total payment: \$ _____

Check your yearbook and, if there are any changes that need to be made to your listed information please fill in the appropriate items below. If not, please just sign and date.

Name: Last _____ First _____ Middle (or initial) _____

Preferred name (if different) _____ Name of Spouse/Significant Other: _____

Address: _____ Apt. _____ City _____ State _____ Zip _____

Phone: (Asterisk Preferred) Home (____) _____ Mobile (____) _____ Work (____) _____

Email: _____

Dual AAUW Memberships: Primary Branch _____ Other Branch(es): _____

Current AAUW Austin Interest Groups you enjoy: _____

Education: Degree Earned/Major(s) _____ Institution and City/State _____ Year Graduated _____

(BA Psychology, BS Business, MBA, etc.)

Changes in work status/position, employer and contact information (if you want published): _____

Additional Honors/Published Materials _____

Interests (hobbies, causes, charities, other organizations): _____

Current volunteer commitments: _____

Permission to Publish personal contact info in newsletter and yearbook _____ (Y) _____ (N)

You may also circle any specific item that you wish to keep private and not publish in the AAUW Austin Yearbook.

Signature _____

Date _____

THANK YOU!

*Austin Community College, University of Texas, St. Edwards University are University/College partners