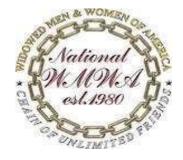
## WIDOWED MEN AND WOMEN OF AMERICA



(WMWA)

Application for Membership www.widowedamerica.org

# Chain of Unlimited Friends

### **Purpose:**

This non-profit organization provides social functions and travel for widowed men and women. The organization consists of links determined be geographical area.

### **Qualifications:**

This organization is open to all widowed men and women. A copy of the death certificate or obituary notice must be submitted at time of application. Please do not send original documents, make copies to send in. This information is strictly confidential, and all proof of qualifications will be returned to the applicant. A widowed person is not eligible if, at the time of spouse's death they were either separated or divorced. Also, a widowed person who re-marries, and the marriage is dissolved, will not be considered eligible for membership.

Initial membership dues are \$30.00 per year if member joins between January and June. If member joins between July and December, dues are \$15.00 for the first membership. All renewal dues are \$30.00 for the year and are due February 28th of each subsequent year.

Each Link formed under WMWA has its own Board of Directors consisting of President, Vice-President, Secretary, Treasurer, Membership Chairperson and Social Chairperson. Various committees are appointed by the Link President to help operate the Link. Each Link plans several social activities per month for members and eligible guests who wish to attend.

# WMWA Link Membership Application Form

Form **Must** be completed in Full (Mark link joining below)











Full Name:			Birthday (MM/DD):
If Nickname used in pla	ce of first name, list here:		
Address:(Street, Apt #,	City, State, and Zip)		
Telephones: Home		_ Cell	
Email Address:			
Check Amount:	Number:		_ Date:
Please make check paya	ble to WMWA; mail with	application a	and required documents to:

**WMWA** PO Box 632052 Littleton, CO 80163-2052