

# The International Women's Association of Kraków

Membership Application Form 2012/13



## DIRECTORY INFORMATION

Family Name:										First Name:									
Address:																			
Home Telephone:										Mobile Telephone:									
Email:																			
Nationality:										Marital Status:									

Please tick this box if you **DO NOT** wish to have the above details included in the membership directory which is available to IWAK members **ONLY** and will not be passed on to any third party under any circumstances

By becoming a member of IWAK, your and/or your family's pictures may be used in the IWAK newsletter or on our website, **UNLESS** requested otherwise in writing.

## PERSONAL INFORMATION

Birthday (DD/MM/YY) :        /        /										Occupation:									
Are you working at present? If yes, please give details:																			
Do you own a business or practice here in Poland? If yes, please give details:																			
Spouse/Partner's Full Name (if applicable):																			
Spouse/Partner's Company/Organisation:																			
Children's Names and Year of Birth:																			
If your children attend school in Kraków, please indicate which one:																			
BISC <input type="checkbox"/>						ISK <input type="checkbox"/>						Polish School <input type="checkbox"/>							
Date of your arrival in Kraków:										Expected length of stay:									
Previous countries of residence:																			
Languages Spoken:																			

## MEMBERSHIP PROFILE

Activities you would be interested in (tick as many as you like)

Coffee Mornings	<input type="checkbox"/>	Evening Book Club	<input type="checkbox"/>
Potluck Luncheons	<input type="checkbox"/>	Girls Night Out	<input type="checkbox"/>
Day Book Club	<input type="checkbox"/>	Wine Tasting	<input type="checkbox"/>
Cooking Workshop (run by a professional chef)	<input type="checkbox"/>	Art/Music/Theatre	<input type="checkbox"/>
Cooking Club (hosted at members' homes)	<input type="checkbox"/>	Cinema	<input type="checkbox"/>
Baby/Kids Club (for ladies with pre-school children)	<input type="checkbox"/>	Aerobics	<input type="checkbox"/>
Museum Visits/Guided Tours	<input type="checkbox"/>	Pilates	<input type="checkbox"/>
Craft Workshops	<input type="checkbox"/>	Yoga	<input type="checkbox"/>
Conversation	<input type="checkbox"/>	Tennis	<input type="checkbox"/>
Walking/Cycling	<input type="checkbox"/>	Dance/Gym Tonic	<input type="checkbox"/>

Please give details of your own hobbies/special skills:

IWAK is run solely by its members on a voluntary basis. Are you willing to help? If so please indicate which:

- Newsletter/Website (proofreading, columns, reviews etc.)
- IWAK Charity Fundraisers (Christmas Ball, Garden Party)
- Helping Newcomers/Being a 'buddy'
- Event Organising
- Other (please specify) \_\_\_\_\_

Would you be willing to host an event in your home? Please specify:

- Morning Event  Max no of people \_\_\_\_\_
- Evening Event  Max no of people \_\_\_\_\_
- Pot luck luncheon  Max no of people \_\_\_\_\_

Finally, please write a few lines introducing yourself to other members. This information will be published in our monthly newsletter. If necessary, please add a separate page.

I hereby agree that I will not use my IWAK membership for personal profit and/or commercial purposes

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

Please sign the form and bring it to either a Newcomers Meeting or Coffee Morning.

## MEMBERSHIP INFO

To ensure that IWAK is not used for commercial purposes and remains a social & family orientated group, membership is available to :

- Expatriate women living in Poland
- Women who are married to, or the partner of, an expatriate
- Women who have lived outside Poland as an expatriate for at least 5 years

### FEES

Full year membership (1 Sep – 31 Aug) & renewals for existing members : **180pln**  
For new members joining after September, 15 pln per remaining membership month

### BANK DETAILS:

Fees may be paid by electronic bank transfer to the account below. Please title the transfer **MEMBERSHIP** and **INCLUDE YOUR NAME AS REFERENCE**. Thank you.

**Bank Address:** Bank Pekao S.A, Rynek Glowny 31, Kraków  
**Account no/nr rachunku:** 22 1240 1431 1111 0010 1227 1545  
**SWIFT:** PKOPPLPW

## FOR OFFICE USE ONLY

RECEIPT NO:

0

Membership Fees Paid:  Amount in pln: \_\_\_\_\_ Welcome email/newsletter sent:   
Entered in the Membership Database:  Email forwarded to the Gmail Contact List  Forwarded to Newsletter:

## RECEIPT OF PAYMENT

IWAK MEMBERSHIP 2012/13

RECEIPT NO.	AMOUNT (pln):	DATE:	MEMBER'S NAME:
0			RECEIVED BY: