



NAWA REGISTRATION FORM

New Member <input type="checkbox"/>	Returning Member <input type="checkbox"/>	Date: _____
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Name:

Contact Info:

Mobile: _____
Email: _____
Address: _____

Spouse or
Partner's Name:

Birthday:

_____/_____/_____ Month / Day

Interests: Please check which activities and events you would like to participate in.
The relevant group activity leader will contact you with more information.

- | | |
|-------------------------------------------------------------------|--------------------------------------------------------------------|
| <input type="checkbox"/> Coffee 'n Chat | <input type="checkbox"/> Happy Hour (weekend) |
| <input type="checkbox"/> Girls Night Out (weekday) | <input type="checkbox"/> Lunch Bunch |
| <input type="checkbox"/> Book Club (daytime) | <input type="checkbox"/> Bridge |
| <input type="checkbox"/> Movie Group | <input type="checkbox"/> Charity: Adopt-a-Granny |
| <input type="checkbox"/> Crafting Group | <input type="checkbox"/> Other Charity events or activities |
| <input type="checkbox"/> Cooking Group | <input type="checkbox"/> Day trips outside of Budapest |
| <input type="checkbox"/> Tours in Budapest | <input type="checkbox"/> I would like to be a Newcomers Buddy |
| <input type="checkbox"/> Family Events | |
| <input type="checkbox"/> Please have a Newcomers Buddy contact me | <input type="checkbox"/> I would like to start a group not listed: |

I would be interest in accepting a Board Position should an opening come available

May we publish your name and/or photograph on our website and/or Facebook page?

If yes, please initial here: _____

May we publish your name, contact information, and birthday in our membership directory?

If yes, please initial here: _____

May we give your name to the Marriott in order to take advantage of their discounts?

If yes, please initial here: _____

Signature: _____ Date: _____

Official Use Only

Membership No: _____ Amount Received: _____