



NAWA REGISTRATION FORM

New Member Date: _____

Contact Info:

Name: _____
Mobile: _____
Email: _____
Address: _____

Spouse or
Partner's Name:

Birthday:

_____/_____
Month / Day

Interests: Please check all activities that are of interest to you.

The relevant group activity leader will contact you with more information.

- | | |
|--|---|
| <input type="checkbox"/> Classic Coffee House Tours | <input type="checkbox"/> Happy Hour (weekend) |
| <input type="checkbox"/> Girls Night Out | <input type="checkbox"/> Wine Tastings |
| <input type="checkbox"/> Book Club (daytime) | <input type="checkbox"/> NAHA (Husbands Night Out) |
| <input type="checkbox"/> Movie Group | <input type="checkbox"/> Charity: Adopt-a-Granny |
| <input type="checkbox"/> Craft Group | <input type="checkbox"/> Other Charity events or activities |
| <input type="checkbox"/> Cooking Group/Culinary Exchange | <input type="checkbox"/> Tours in Budapest |
| <input type="checkbox"/> Lunch Bunch | <input type="checkbox"/> Day trips outside of Budapest |
| <input type="checkbox"/> Kidz Klub | <input type="checkbox"/> Give a tour: Discovering my District |

- I would like to suggest topics for General Meetings: _____
- I would like to start a group not listed: _____
- I would be interested in accepting a volunteer Board Position should an opening become 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, spouse or partner's name and birthday in our membership directory?

If yes, please initial here: _____

Signature: _____

Date: _____

Official Use Only	
Amount Received:	_____
Date:	_____
RF: 08/18	