



NACOPRW SoCal
(National Conference of Puerto Rican Women - Southern California Chapter)
29851 Aventura, Suite K, #80156, Rancho Santa Margarita, CA 92688

Member Application Form

New ____ Continuing ____ (continuing member provide any updates below).

Name: _____ 18 years or older? Y__ N__

Birthday: _____ Birthplace: _____

Relation to Puerto Rico and/or Puerto Ricans _____

Home address: _____

City: _____ State: _____ Zip: _____

Mobil Home phone: _____ Work phone: _____

Mobile: _____ E-mail: _____

Place of employment/organization: _____ Retired _____

Occupation: _____

Children's names and ages:

How did you learn about us?:

The member commits to the purpose and goals of the chapter, and it is actively involved in the organization as appropriate

CHECK APPLICABLE MEMBERSHIP TYPE

Active* \$50.00 Puerto Rican or descent, 18 years or older.

Active Senior \$25.00 *Discount for seniors 65 years or older.

Student \$25 *Discount for students.

Associate/At Large* \$35.00 Other persons, eighteen (18) years of age or older.

Institutional \$40.00

Signature: _____ **Date** _____

Pay On-line (website via PayPal) _____ **Check #** _____

INSTRUCTIONS:

- Complete and email this form to nacoprwsocal98@gmail.com. Proceed to pay online or by check (see instructions below.)
- To pay online go to our website (www.nacoprwsocal.org) and go to DONATE. This will transfer you to PayPal to complete your payment. On the "add special instructions to the seller" write "membership dues".
- To pay via check, make your check payable to **NACOPRW SoCal** and send to: NACOPRW SoCal, P.O. BOX 80156, Rancho Santa Margarita, CA 92688. On the check write "membership dues.")
- If you wish and it's easier for you, you can print this form and send by mail.

NATIONAL CONFERENCE OF PUERTO RICAN WOMEN, INC. SOUTHERN CALIFORNIA CHAPTER

(Revised 12/29/22)

NACOPRW SoCal SURVEY OF MEMBER RESOURCES:

Please take a moment and fill out the following survey. This will help us to know more about you.

Profession, Work Area, or Interest Area/s:

Your Area of Expertise: _____

Hobbies or Talents: _____

Spouse's or partner's name and occupation (If applicable):

If you or other family members are willing to assist NACOPRW-SoCal in the following, please check all the areas of expertise that apply:

Fundraising

Planning of Activities/Event Planning

Non-profit Organization (knowledge/experience)

Choreography/Dance

Advertising/contacting media

Play Instrument (specify):

Public Relations/Networking

Puerto Rican Cooking

Journalism/Proofreading

Puerto Rican Music

Social Media

Website

Writing Skills/Translation (Spanish-English)

Puerto Rican History

Computer skills

Artistic Ability (painting, flower arranging, decorations, jewelry-making, etc.)

Accounting/bookkeeping

Sewing

Discount/Donations (merchandise, services, airfare, souvenirs, etc.)

Other (specify): _____

Agreement and Release Form:

I certify that the information provided in this application is true and correct. I hereby authorize NACOPRW-SoCal to use photos taken at the chapter's events for promotional purposes including the chapter's website.

Signature: _____ Date: _____