

Powerful Women International, Inc.

Power Purpose Possibilities

INTRODUCTORY OFFER

Membership Application

Contact Name _____

Company/Organization Name _____

Address _____ City _____ State _____ Zip _____

Mailing Address: _____ City _____ State _____ Zip _____

Country _____ Business Phone _____ Cell Phone _____

Best number to reach you: Work Cell

Primary Email: _____ Alternate Email: _____

Important! Your membership confirmation will be sent via e-mail, along with other PWI communications.

Company Website: _____

Why are you joining PWI _____

Who were you referred by? _____

What goals are you working on now? _____

What are your dreams for the future? _____

We want to know about your goals and dreams so we can assist you in any way that we can. For example, if we know you want to write a book, we can put you with writers or publishers or put together a workshop for people who have similar interests whether it's on how to self-publish or how to start your own business.

Date of Application: _____ *Please return this form with your full payment to assure proper credit.*

\$100.00 per year Introductory Promotion. **Charge my VISA, MasterCard, or American Express**

CC # _____ Auth. Code _____ Exp. Date _____

Name on Card: _____

Billing Address _____ City _____ State _____ Zip _____

Signature of Cardholder: _____

I would like a copy of this application emailed to me at _____ or faxed to me at _____.

Make checks payable to Powerful Women International and mail to the address below.

If you want to fax or email this form, please send with payment info to:

Fax to 415-503-1184 Email to info@powerfulwomenintl.com.