

NCCW Membership Form

Be the Voice of Catholic Women

When you join the National Council of Catholic Women, you are part of a national organization that speaks for your Catholic values and supports, empowers and educates all Catholic women in spirituality, leadership and service.

NCCW Individual members also:

- * Are represented at the biannual meetings of the United States Conference of Catholic Bishops
- * Have access to NCCW Spirituality, Leadership and Service Commissions' programs and resources
- * Are invited to serve on NCCW Commission teams and Committees
- * Share friendships with other Catholic women from all over the country
- * Are represented at the United Nations, The World Union of Catholic Women Organisations (WUCWO), Catholic Social Ministry Gathering, Religious Alliance Against Pornography
- * Share in Partnerships and Collaborations with Catholic Relief Services, Cross Catholic Outreach, Center for Missing and Exploited Children, Catholic Climate Covenant
- * Can participate in Monthly Advocacy and Leadership Calls
- * Access to NCCW website members' only site

Please select your membership category:

Supporting Member (\$100) – Benefits Include:

- * Annual subscription to the quarterly *Catholic Woman* magazine
- * Eligibility to vote in NCCW elections and at the Annual Business meeting

Exclusive Benefits for Supporting Members Only:

- * Supporting Member pin that demonstrates your commitment to NCCW
- * Special Supporting Member ribbon at Annual Convention

Individual Member (\$50) – Benefits Include:

- * Annual subscription to the quarterly *Catholic Woman* magazine
- * Eligibility to vote in NCCW elections and at the Annual Business meeting

I wish to pay for my membership by:

Credit Card Check (*enclosed*) made payable to NCCW check# _____

Credit Card Information:

MasterCard Visa Discover

Name as it appears on card _____

Credit Card Number _____ Expiration Date _____ Security Code _____

Member Information: Enroll _____ Renew _____ Member # (found on back of magazine) _____

Name _____ Birthday _____

Address _____

City/State/Zip _____

Phone _____ Email _____

Referral Information (for new members or members who have lapsed 1+ year):

Referred by _____

My Diocese _____ My Province _____

Please return this application with your check or credit card information to the following address:
Membership Department, National Council of Catholic Women 10335-A Democracy Lane, Unit 201
Fairfax VA 22030, Phone: 703.224.0990, Fax: 703.224.0991 nccw01@nccw.org