

## ABWA NEAPOLITAN MEMBER PROFILE

PERSONAL			BUSINESS		
Name:			Company Name:		
Address:			Address:		
City:	State:	Zip:	City:	State:	Zip:
Home Phone:			Work Phone:		
Home Fax:			Work Fax:		
Email Address:			Email Address:		
Birthday:			Cell Phone:		
Spouse Name:			Web Address:		
Childrens' Names:			Professional Accomplishments: _____ _____ _____ _____ _____ _____		
Yrs in Naples:	Yr Relocated:	From?			
Previous ABWA Chapter Affiliation(s): _____ _____					
Positions Held in ABWA (please list all): _____ _____ _____ _____ _____ _____ _____ _____			Personal Development Interests: _____ _____ _____ _____ _____		
Memberships in other organizations: _____ _____ _____ _____ _____					
Hobbies & Leisure Activities: _____ _____ _____					
<p><b>Complete additional sheets if desired to complete your submission.</b>  <b>Return to Membership Chair, Kelly Lauman via email to <a href="mailto:klauman@lutgertinsurance.com">klauman@lutgertinsurance.com</a> or fax to 239-262-5360.</b>  <b>Local dues are \$48 annually</b></p>			<p>Committees you would consider serving on (circle all that apply):            Membership   Education   Social   Newsletter   Publicity            Sponsorships   Archives   Hospitality   Programs            Ways &amp; Means   Women in History   Holiday Raffle/Auction</p> <p>Additional Comments: _____ _____ _____ _____</p> <p>Date Submitted: _____</p> <p>Referred By: _____</p> <p>National Member #: _____</p>		