

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 \_\_ \_\_ \_\_ \_ \_\_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_ \_\_ \_\_\_

P**lease 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**](mailto:nccw01@nccw.org)