



Membership Application Form

PERSONAL/CONTACT INFORMATION

Name: _____ Email: _____
Address: _____ Telephone: _____
City: _____ Province: _____ Postal Code: _____

Membership in the Romance Writers of America (RWA) is mandatory for ORWA members

I am a member of the Romance Writers of America. RWA# _____

My RWA membership is pending

WRITING EXPERIENCE

Writing Level

- Beginner
 Intermediate
 Advanced
 Published
 Other, specify: _____

Writing Genre

- Contemporary
 Historical
 Paranormal
 Erotica
 Published
 Other, specify: _____

PAYMENT OPTIONS

How would you like to pay?

PayPal

(Visit us at <http://www.ottawaromancewriters.com/membership/form.html>)

Cheque/Money Order

(If you choose this option, on receipt of your application, the Registrar will inform you where to mail your payment.)

In Person

(You can make your payment in person to the Treasurer at the next ORWA meeting.)

OPTIONAL INFORMATION

Occupation: _____

If retired, please indicate occupation prior to retirement

Have you ever been a member of any other RWA chapter?

No, Yes, if so, which Chapter?

How Did You Learn About ORWA?

By applying, I understand and agree that my membership will only be activated upon receipt of payment and confirmation of RWA membership.

Signature: _____ Date: _____