



## **ACTIVE Republican Women Membership Application**

Year \_\_\_\_\_

Check One: \*New \_\_\_ Renewing \_\_\_ Returning \_\_\_

Annual Dues: Full Member \$30.00 \_\_\_ Associate \$15.00 \_\_\_ (for those belonging to another Federated Women's Club or men)

NAME \_\_\_\_\_

(As it appears on Voter Registration – Must be a Registered Republican to join)

ADDRESS \_\_\_\_\_

CITY and STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ - \_\_\_\_\_ CELL NUMBER \_\_\_\_\_ - \_\_\_\_\_

E-MAIL \_\_\_\_\_ BIRTHDAY \_\_\_\_/\_\_\_\_

Referred/Sponsored by: (new member only) \_\_\_\_\_

Please indicate if you would like a name badge for an additional \$10.00 yes\_\_ no\_\_

Name to be printed on your name badge \_\_\_\_\_

I am a registered REPUBLICAN

Signature: \_\_\_\_\_ DATE: \_\_/\_\_/\_\_

Date of payment \_\_/\_\_/\_\_ Cash\_\_\_ Check # \_\_\_\_\_ Credit card\_\_\_

Please make check payable to ARW and mail to:  
889 South Rainbow Blvd. Suite 146 LV, NV 89145

Visit our website: [www.arwlv.com](http://www.arwlv.com)