

Bush Legacy Republican Women of Weatherford

MEMBERSHIP APPLICATION

JOIN NOW FOR 2021

Mail to BLRWW Attn: Membership, P.O. Box 283, Weatherford, Texas 76086

Please print clearly ___ **New** or ___ **Renewal** **Today's Date:** _____

CATEGORY OF MEMBERSHIP

___ \$50 Regular Republican Woman* (Includes membership in the state and national Federations of Republican Women)

___ \$25 Young Affiliate (Teenage woman 13 - 17 years)

___ \$35 Associate Member (member of another club and/or Republican men) Primary Club _____

___ I believe in the Republican values and want to support this club with an additional donation of \$ _____ one time monthly

Ms. Miss Mrs. Mr. Dr. Other _____

Name: _____ Spouse Name _____

Address: _____

City/Zip: _____

Best Phone Number: _____ Email: _____

*(If you wish an item to NOT be shared with other members, place a checkmark in the box beside that item)

***Occupation:** _____

(**Note:** occupation is required for reporting purposes)

Birthday month: _____ day: _____ Recruited by: _____

Please contact me regarding the following BLRWW activities: Headquarters Fundraisers

Festivals Voter registration Hospitality Campaign activities Awards Parades Other

Make checks payable to: BLRWW, PAC (no corporate checks)

Credit/Debit Name as it appears on card _____

Billing address for card _____, Zip _____

I authorize BLRWW to charge my account VISA MC Discover AMEX In the amount of \$ _____

Credit Card Number _____ Security Code # _____

Expiration Date ____/____ Signature _____ Today's date _____

**Meetings are on the 3rd Thursday of each month; 11:30
at the Doss Center in Weatherford, TX**

For club use:

Date Received _____ Cash _____ Check# _____ CC _____ Received by _____