



## Membership Form

Name \_\_\_\_\_

Name(s) of additional member(s) in household \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone (home) \_\_\_\_\_ Phone (work/day) \_\_\_\_\_

Cell phone \_\_\_\_\_ Email address \_\_\_\_\_

Amount enclosed \$ \_\_\_\_\_

\$75.00 one member. \$100.00 two members same household. Other available membership categories:  
Student (16 & Over) \$30.00.

*Your dues are tax deductible to the extent allowed by law.*

Please write your check to: *League of Women Voters of Charlotte Mecklenburg*

Comments (e.g. interests, how you heard about the League):



Please print this page and fill out the Membership Information Form. Then mail it with your check to:

**League of Women Voters of Charlotte Mecklenburg**  
**1817 Central Ave., Room 210**  
**Charlotte, NC 28205**