

Scan this QR code if you'd rather join and pay online



MEMBERSHIP REGISTRATION FORM

CONTACT INFORMATION	ON			
First Name:	Last Nai	me:		
Email:	Phone Num	ber:		
Address:		O.		
Street Address		City	State	Zip
ADDITIONAL HOUSEHO Each additional household member is co		provide each a uniq	ue email address.	
First Name:	Last Na	me:		
Email:	Phone Num	ıber:		
MEMBERSHIP DUES Please	e select what you are able:			
★ Individual members: LWVM0 pay what you can (\$20 minimum)		e to \$75/year is	recommended by	LWVUS, or
★ Each additional household m payment. For two (2) members,			the purpose of	dues
★ Life members: In appreciatio exempt from dues.	n of one's dedication to democ	racy, members	for more than 50) years are
★ Membership in the League or national and state levels. All rela membership year will renew on	ated newsletters and advocacy	alerts will be a	vailable to you. ٦	•
DUES AMOUNT ENCLOSED: _				
Membership dues are now paid di form to: LWVMC, PO Box 10133, lwvmcva.org or use the QR code a	Blacksburg, VA 24060-0133. Jo			
DONATIONS Contributions are our most imp we wouldn't be able to be effect our local League (LWVMC), oth	tive in our work. Please include	donations by s	eparate check, p	• •
Mail donations to LWVMC, PO Bo	ox 10133, Blacksburg, VA 24060	0-0133.		
ADDITIONAL INFORMA	ATION			
Select volunteer opportunities	of interest:			
☐ Voter Education ☐ Co	mmunications Advocac	v 🗍 Opera	tions	