

650-342-5853 — info@lwvncsmc.org — www.lwvncsmc.org

Yes, I want to join the LWVNCSMC or renew my membership!

Name:	
Additional household members:	
Address:	
Phone:	
Email:	
Individual Membership (\$75)	
Additional Household Member(s) (\$40 each)	
Contribution	
Total	

Please enclose a check for the total amount above made out to LWVNCSCM and send it to 444 Peninsula Ave Suite 1, San Mateo CA 94401-1679

We are a 501c3 organization. Dues and contributions are tax-deductible to the extent allowed by law

I am interested in volunteering:

Voter Education	Housing Affordability
Voter Registration	Civics Education
Government Transparency	Internal League Activities

Other: _____