

LEAGUE OF WOMEN VOTERS OF JOHNSON COUNTY MEMBERSHIP FORM

Annual Dues - New Renewal

Individual membership \$70 - Family membership \$105 - Student membership \$20

Name(s) _____

Address _____

Street City Zip _____

Email _____ Preferred Phone _____

Please make
check payable
to LWVJC and
mail to:



LWVJC Membership
P.O. Box 5452
Coralville, IA 52241

OR pay online at our
website lwwjc.org

Membership email address:
lwwjcmembership@gmail.com