

# LWV LEAGUE OF WOMEN VOTERS® PASADENA AREA

Alhambra • Altadena • Arcadia • Bradbury • Duarte • La Cañada Flintridge • Monrovia • Monterey Park • Pasadena  
San Gabriel • San Marino • Sierra Madre • South Pasadena

## MEMBERSHIP FORM

Please enclose a check for dues in the category selected and mail to  
**LWV-PA, 65 South Grand Ave., Pasadena, CA 91105.**

You may also pay your dues via credit card on the League website,  
[www.lwv-pa.org](http://www.lwv-pa.org) LWV-PA is a 501(c)(3) organization

*Donations are tax deductible*

### PRIMARY MEMBER PROFILE (Please complete WHEN remitting dues) New \_\_\_\_\_ Renewing \_\_\_\_\_

Name \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone: Home \_\_\_\_\_ Cell \_\_\_\_\_ Email: \_\_\_\_\_

### DUES INFORMATION

The Membership has approved the procedure that all dues will be paid on **July 1** of each year.  
If you have newly joined this April -June, you are current in your dues. If you need to, you may choose an amount from the flexible dues option. As you know, we rely on membership dues to support the work of our League

#### MEMBERSHIP CATEGORIES:

- |   |   |       |
|---|---|-------|
| <input type="checkbox"/> Individual — \$100             | <input type="checkbox"/> Individual Sustaining — \$200 (\$100 + \$100 donation)   | _____ |
| <input type="checkbox"/> Household -- \$150             | <input type="checkbox"/> Household Sustaining — \$250 (\$150 + \$100 donation)  | _____ |
|   | <input type="checkbox"/> Student \$15   | _____ |
| <input type="checkbox"/> Flexible Dues Option as needed | <input type="checkbox"/> \$85 <input type="checkbox"/> \$70 <input type="checkbox"/> \$60 <input type="checkbox"/> \$50 <input type="checkbox"/> \$40 <input type="checkbox"/> \$30 | _____ |

To support the flexible dues option, I would like to contribute to LWV-PA. \_\_\_\_\_

**TOTAL** \_\_\_\_\_

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### MORE ABOUT ME (This info will help LWV better serve you and represent our Service Areas)

What is your gender identity? \_\_\_\_\_

Which category below includes your age?

- |                                |                                |
|--------------------------------|--------------------------------|
| <input type="checkbox"/> 18–29 | <input type="checkbox"/> 50-69 |
| <input type="checkbox"/> 30-49 | <input type="checkbox"/> 70+   |

What is your employment status?

- Full-time  Part-time  Retired

Which race/ethnicity do you identify with?

- |  |  |
|--|--|
| <input type="checkbox"/> White                                     | <input type="checkbox"/> Latinx                            |
| <input type="checkbox"/> Asian                                     | <input type="checkbox"/> American Indian or Alaskan Native |
| <input type="checkbox"/> African American, Afro-Caribbean African  | <input type="checkbox"/> Multi-racial                      |
| <input type="checkbox"/> Native Hawaiian or other Pacific Islander | <input type="checkbox"/> Other (please specify)            |

## Primary Member Areas of Interest

- |  |                                      |  |
|--|--------------------------------------|--|
| <input type="checkbox"/> Advocacy                            | <input type="checkbox"/> Events      | <input type="checkbox"/> Natural Resources |
| <input type="checkbox"/> Communications                      | <input type="checkbox"/> Finance     | <input type="checkbox"/> Social Justice    |
| <input type="checkbox"/> DEI (Diversity, Equity & Inclusion) | <input type="checkbox"/> Healthcare  | <input type="checkbox"/> Units             |
| <input type="checkbox"/> Development (fundraising)           | <input type="checkbox"/> Immigration | <input type="checkbox"/> Voter Services    |
| <input type="checkbox"/> Education                           | <input type="checkbox"/> Membership  |  |

*Please complete this section if you are submitting dues for the Household Membership category*

### HOUSEHOLD MEMBER PROFILE

Household Membership 2<sup>nd</sup> Name \_\_\_\_\_

Phone: Home \_\_\_\_\_ Cell \_\_\_\_\_ Email: \_\_\_\_\_

### MORE ABOUT 2<sup>nd</sup> Member (This info will help LWV better serve you and represent our Service Areas)

What is your gender identity? \_\_\_\_\_

Which category below includes your age?

- |                                |                                |
|--------------------------------|--------------------------------|
| <input type="checkbox"/> 18-29 | <input type="checkbox"/> 50-69 |
| <input type="checkbox"/> 30-49 | <input type="checkbox"/> 70+   |

What is your employment status?

- Full-time  Part-time  Retired

Which race/ethnicity do you identify with?

- |  |  |
|--|--|
| <input type="checkbox"/> White                                     | <input type="checkbox"/> Latinx                            |
| <input type="checkbox"/> Asian                                     | <input type="checkbox"/> American Indian or Alaskan Native |
| <input type="checkbox"/> African American, Afro-Caribbean, African | <input type="checkbox"/> Multi-racial                      |
| <input type="checkbox"/> Native Hawaiian or other Pacific Islander | <input type="checkbox"/> Other (please specify)            |

### Household Member Areas of Interest

- |  |                                      |  |
|--|--------------------------------------|--|
| <input type="checkbox"/> Advocacy                            | <input type="checkbox"/> Events      | <input type="checkbox"/> Natural Resources |
| <input type="checkbox"/> Communications                      | <input type="checkbox"/> Finance     | <input type="checkbox"/> Social Justice    |
| <input type="checkbox"/> DEI (Diversity, Equity & Inclusion) | <input type="checkbox"/> Healthcare  | <input type="checkbox"/> Units             |
| <input type="checkbox"/> Development (fundraising)           | <input type="checkbox"/> Immigration | <input type="checkbox"/> Voter Services    |
| <input type="checkbox"/> Education                           | <input type="checkbox"/> Membership  |  |

5-24-20