

League of Women Voters of San Joaquin County

P.O. Box 4548
Stockton, CA 95204

LWVSJC Membership Form

Please enter the following Information, print the form and mail with a check to our office.

Date: _____

Name: _____

Name of additional member in
household: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Work/day Phone: _____

Email Address: _____

Preferred medium for receiving newsletters:

Paper copy delivered by mail

Electronic copy delivered by email

- Student Membership FREE
- Individual Membership \$90
- Two Members Same Household \$140 (be sure to list both Names above)
- Mission Support Membership \$150
- Friend of the League \$30

I am a New Member/Associate

This is a Member/Associate Renewal/Restart

My Check is Enclosed - Payable To: League of Women Voters of San Joaquin County
Membership dues are not tax deductible. We are a 501(c)(4) organization.

Please note any special interests, knowledge, or possible volunteer areas of interest:

Fill out the form, then use the Print function in your browser to print the form and mail it to the address above.