



**LEAGUE OF WOMEN VOTERS  
OF WELLESLEY**

**JOIN THE LEAGUE FORM**

Name \_\_\_\_\_

Name(s) of Additional Members in Household

\_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Amount Enclosed \$ \_\_\_\_\_

Phone (home) \_\_\_\_\_ Phone (work/day) \_\_\_\_\_

Phone (cell) \_\_\_\_\_

Email Address \_\_\_\_\_

☐ Please check here if you do ***not*** want your email address included in our directory for members

\$60 one member, \$80 two members of the same household. Other available membership categories: \$20 for a student membership. ***Dues are not tax deductible.***

Comments (e.g. interests, how you heard about the League) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please mail your check made out to League of Women Voters – Wellesley  
along with this form to:**

**League of Women Voters of Wellesley  
6 Monroe Road  
Wellesley, MA 02481**

**Thank you for your support!**