



Williamson County Republican Women

Membership Form

Name: _____ Spouse: _____

Street: _____

City: _____ State: _____ Zip: _____ Home Tel: _____

Cell: _____ Email: _____

Other Republican Women's Club Membership: _____

Occupation: _____ Employer: _____
 (Required by State PAC Laws) (optional)

Regular membership is open to all Republican Women. Associate membership is open to all Republican men and to Republican Women with a primary membership in another club. Dues are for a calendar year.

___ Regular @ \$30/year ___ Associate @ \$20/year

___ Add my Spouse as an Associate @ \$20/year, his occupation: _____

___ I would like WCRW Name Badge for an additional \$5.

___ My contact info. can be published in the WCRW Directory. Sig. _____

___ DO NOT publish my information in the WCRW Directory

Alternate contact info for the WCRW directory: _____

_____ Sig: _____

Make check payable and mail to:

**WCRW-PAC
 PO BOX 342
 Round Rock, TX 78680**

BE SURE TO SIGN where necessary!

Volunteer Opportunities, please check your interests:

<input type="checkbox"/>	Hospitality/Social	<input type="checkbox"/>	Fundraising	<input type="checkbox"/>	Membership	<input type="checkbox"/>	Parliamentarian
<input type="checkbox"/>	Club Treasurer	<input type="checkbox"/>	Campaign Activity	<input type="checkbox"/>	Technology	<input type="checkbox"/>	Legislative
<input type="checkbox"/>	PAC Treasurer	<input type="checkbox"/>	Newsletter	<input type="checkbox"/>	Directory	<input type="checkbox"/>	Caring for America
<input type="checkbox"/>	PR/Media	<input type="checkbox"/>	Literacy	<input type="checkbox"/>	Scholarship	<input type="checkbox"/>	Historian
<input type="checkbox"/>	Outreach	<input type="checkbox"/>	Bylaws	<input type="checkbox"/>	Military Liaison	<input type="checkbox"/>	