

## **MONTGOMERY COUNTY REPUBLICAN WOMEN**

2024 Membership (Jan.1-Dec.31)

Please fill out completely—new members and renewals.

| Date   | Birthday (Month and Day)         |      |
|--|----------------------------------|------|
|  | New                              |      |
| Primary Member   |                                  | \$40 |
| Associate Member (only if primary member of another RW club or are a male) |                                  | \$25 |
| (Please list the name of your primary                                      | / club)                          |      |
| Couple Membership (primary and associate)                                  |                                  | \$60 |
| Young Affiliate (ages 13-under 18)   |                                  | \$15 |
| Name   | Spouse                           |      |
| Name tag preference (if different fro                                      | om above)                        |      |
| Homo Addross   |                                  |      |
| Home Address   |                                  |      |
|  |                                  |      |
| Mailing Address  |                                  |      |
|  |                                  |      |
| Email Address  |                                  |      |
| Telephone: Home  | Mobile                           |      |
| Work   |                                  |      |
| Occupation: (Required by Texas Ethics Comm                                 | nission)                         |      |
| May we publish your contact information i                                  | n our MCRW directory Yes No_     |      |
| Referred by (new members only)   |                                  |      |
| Precinct (voting box) # Congres  | sional District Senate District_ |      |
| Please indicate any committee on which ye                                  | ou would like to serve:          |      |
| Americanism Hospitali  | ity Political Activities         |      |
| Caring for America Legislati   | on Publicity                     |      |
| Community Involvement Literacy   | Telephone                        |      |
| Email Members  | ship Ways and Means              |      |
| Historian Newslett   | er Website                       |      |
|  | Yearbook                         |      |
| Would you be willing to serve on the MCRW $$ B                             | oard? Yes No                     |      |
| Please make your check payable to MCRW and mail                            | to: MCRW                         |      |
|  | P O Box 1766                     |      |
| 2  | Conroe, TX 77305                 |      |
| Cash Check # Amount_   |                                  |      |
| For Treasurer's Use only: Date reported to TFRW                            | OUDINISSION #                    |      |