



# Membership Application

You are cordially invited to join the Republican Women of Hall.

And . . .please bring your friends!

Regular meetings are held according to an announced schedule.

Meeting dates and locations are announced via email, Facebook and on the website at [rwhall.org](http://rwhall.org).

**Annual Membership Levels — Check the of the following:**

- \_\_\_\_\_ \$45 Individual membership for women.
- \_\_\_\_\_ \$25 Individual non-voting membership for men.
- \_\_\_\_\_ \$25 Individual non-voting membership for women who are members of another Federated Club.
- \_\_\_\_\_ \$20 Name Badge

**Membership Badge Order**

If ordering a membership badge, please provide the name(s) as you want to appear on the badge(s):

Name(s) 1) \_\_\_\_\_ 2) \_\_\_\_\_

Please make check payable to REPUBLICAN WOMEN OF HALL

**Dues are collected at meetings or mailed to:**

Angie McClure, RWH Treasurer  
3917 Bloomfield Way SW  
Gainesville, GA 30504

**Complete the following member information.**

Name: \_\_\_\_\_ Spouse/Partner: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail address: \_\_\_\_\_ Phone: \_\_\_\_\_

**Associate Member Information:**

Name: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Membership lists and contact information are not given to any other organization or nonmember.

We need active committees and will welcome your participation. Please check those of interest to you.

- |                                      |   |   |
|--------------------------------------|---|---|
| <input type="checkbox"/> Program     | <input type="checkbox"/> Events         | <input type="checkbox"/> Achievement / Awards |
| <input type="checkbox"/> Membership  | <input type="checkbox"/> Bylaws         | <input type="checkbox"/> Newsletter           |
| <input type="checkbox"/> Hospitality | <input type="checkbox"/> Fundraising    | <input type="checkbox"/> Caring for America   |
| <input type="checkbox"/> Campaign    | <input type="checkbox"/> Publicity & PR | <input type="checkbox"/> Communications       |

**FOR OFFICE USE ONLY:**

Date Received: \_\_\_\_\_ Cash: \_\_\_\_\_ Credit Card: \_\_\_\_\_ Check # \_\_\_\_\_

Received In Person: \_\_\_\_\_ By Mail: \_\_\_\_\_ Date of Deposit: \_\_\_\_\_ Amount Received: \$ \_\_\_\_\_