



Spring Mountain Republican Women Application Form

New ___ Renewal ___ Full Member ___ Associate Member ___

PLEASE PRINT clearly Date _____

Name _____

Resident Address _____

City _____ State _____ Zip Code _____

Home Telephone _____ Cell _____

Email Address _____

Birth Month & Day _____ Referred by _____

I want to learn more about these committees to participate in our Club.

MARK in order the 3 you are interested in.

The Committee Chair will contact you with more info.

- | | | |
|----------------------------|-------------------------------------|---------------------------|
| Americanism _____ | Boutique _____ | Campaign Activities _____ |
| Chaplain _____ | Echo Newsletter _____ | Fundraising _____ |
| Historian _____ | Hospitality/Greeter _____ | Legislation _____ |
| Membership _____ | Parliamentarian _____ | Programs/Speakers _____ |
| Literacy & Education _____ | Social Media/Public Relations _____ | |

I am including payment for

_____ \$40 Initial Full Membership or Renewal Dues

_____ \$20 Associate Membership (non-voting member)

Name of your home club if you are an Associate Member _____

_____ \$15 for Magnetic Name Badge

Name on Badge _____

You are not obligated to buy a badge... however, members are encouraged to do so. Badges MUST be paid for when ordered.

\$ _____ Total Enclosed How Paid? Circle: Cash, Check

_____ Other _____

I, _____ declare that I am a REGISTERED REPUBLICAN.

PLEASE SEND or return this completed form with your check (made payable to SMRW)

To **SMRW**
c/o P. Joyce
9620 Atwood Ave LV NV 89129



Questions?
Text
Effie Herman
at
702-677-5661