



Date: _____

Application for Membership

I would like to join and help the *Republican Women of Trussville* make a difference in our local politics as well as in Alabama and our nation.

Enclosed is my check for \$45.00 made payable to RWOT. If you are a male, or a member of another federated Republican Womens Club, you may join RWOT as an associated member for \$20.00. (see by-laws for explanation on member vs associate member)

Please circle type of membership desired: **Regular** **Associate**

Contact Info:

Name _____ Date _____

Mailing Address _____

City & State _____ ZIP _____

Home Phone _____ Work _____ Cell _____

E-MAIL _____

Preferred method of contact: _____ Referred by _____

*Contact info is not shared outside of RWOT club at any time.

COMMITTEES/INTERESTS: Please indicate the area(s) in which you have an interest!

_____ Literacy _____ Campaign Activities _____ Community Outreach/ Service

_____ Fundraising _____ Legislative _____ Hospitality _____ Membership

_____ Publicity/Media _____ Caring for America (Support Troops) _____ Phone Committee

_____ **I can help where needed.**

I realize this is a REPUBLICAN club and I will support Republican ideals and encourage loyalty to the Republican Party.

Signature: _____

TOTAL ENCLOSED \$ _____ Check # _____ Cash _____

Please mail this form with payment to:

RWOT / Treasurer
P.O. Box 972
Trussville, AL 35173

www.RWOT.net