

**BAY AREA REPUBLICAN WOMEN'S CLUB
MEMBERSHIP APPLICATION**

Membership Dues for Current Year November 1, 2020 through October 31, 2021

Name: _____
(Please Print)
First Middle Last

Occupation: _____ (Information Required by Texas Ethics Commission)

Birthday _____ Spouse's Name: _____
Month / Day (If Applicable)

Address: _____
Street or P. O. Box City State Zip plus 4 digit extension

Telephone: Home: (_____) _____
Office: (_____) _____
Fax: (_____) _____
Mobile or Pager: (_____) _____

E-Mail: _____ (Information Requested by BARW & TFRW)

County & Voting Precinct #: (BARW By-Laws Article IV, Sect.1) Precinct# _____ Brazoria County Precinct # _____ Galveston County Precinct # _____ Harris County

Type of Membership:

_____ \$ 25.00 Full Membership for Women _____ Renewal _____ New Member

_____ \$ 15.00 Associate Membership RWC Members _____ Renewal _____ New Member
Name of RWC Full Membership: _____

_____ \$ 15.00 Associate Membership for Men _____ Renewal _____ New Member



Areas of Interest: ___ Literacy ___ Legislative ___ Campaign Activities ___ Fundraising
 ___ Events ___ Membership ___ Telephone ___ Publicity ___ Community Service
Other: _____

Please Make Checks Payable to: **BARW-PAC** Date: _____ Amount Paid: _____ Check # _____
(INCORPORATED CHECKS ARE PROHIBITED)
For Information Call: Susan Franklin at 281-461-6898
Send to: BARW Membership Chair
P.O. Box 58103
Webster, Texas 77598-8103