



ROCKWALL COUNTY REPUBLICAN WOMEN MEMBERSHIP APPLICATION

Dues: \$40.00 per year for all membership categories:

New Active Associate

Name tags: \$15.00 (optional) **Paid Amount: \$**

Paid By: Check # Credit Card (last 4 digits) Cash

Date: _____

Name: _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Cell Telephone: _____ **E-Mail:** _____

Occupation: _____

Date of Birth: _____ / _____ Spouse's Name: _____

Are you registered to Vote in Texas? **Did you vote in the last Primary Election?** **Precinct Number:**

Are you currently serving as an Elected Official? If Yes, please provide office: _____

Membership Roster: I Agree to have my name, phone and email address listed in the RCRW Membership Roster:

What areas are you interested in serving:

Special Events Fundraising Hospitality Newsletter Social Media
 Membership Website Campaign Activities Community Relations



Dues



Name Tag

OUR MISSION

Promote an informed electorate through political education

Increase the effectiveness of women in the cause of good government through active political participation

Facilitate cooperation among Republican women of Texas

Foster loyalty to the Republican Party and promote its ideals

Work for the election of the Republican Party nominees

Be sure to follow up on all social media: **RCRW.org** **facebook.com/RCRWTX** **Instagram – rockwallcountyprepublicanwomen**

Political advertisements paid for by Rockwall County Republican Women (RCRW). Contributions are not federal tax deductible as charitable contributions. Corporate Contributions ARE NOT PERMITTED.

Visit our website at RCRW.ORG for more information.

All applicants will be reviewed for, including but not limited to, voting frequency, voting record, and social media posts. Applicant will be notified if their application has been denied.

Please submit or mail Membership Application with dues to:

Rockwall County Republican Women, P.O. Box 1354, Rockwall, Texas 75087