



ARROWHEAD REPUBLICAN WOMEN



Arrowhead
Republican Women

2021 APPLICATION FOR MEMBERSHIP OR RENEWAL

NAME _____ BIRTH MONTH _____

ADDRESS _____ CITY _____ ZIP _____

CONTACT NUMBER _____ E-MAIL ADDRESS _____

REGISTERED REPUBLICAN YES NO NAME ON VOTER REGISTRATION _____

AZ LEGISLATIVE DISTRICT # _____ CONGRESSIONAL DISTRICT # _____ SUPERVISORY DISTRICT # _____

PRECINCT COMMITTEEMAN YES NO NAME OF PRECINCT _____

REFERRED BY _____ ARE YOU A VETERAN? YES NO IF YES BRANCH OF SERVICE _____

OTHER POLITICAL ACTIVITIES _____

ARE YOU NOW OR HAVE YOU BEEN A MEMBER OF ANOTHER REPUBLICAN WOMEN'S CLUB? _____

ANNUAL DUES (JAN 1 – DEC 31) FULL MEMBERSHIP - \$40.00 NEW OR RENEWAL

PLEASE SELECT AS MANY AREAS IN WHICH YOU WOULD BE INTERESTED AND WILLING TO SERVE:

- | | | |
|--|--|---------------------------------------|
| <input type="checkbox"/> ACCOUNTING | <input type="checkbox"/> CARING FOR AMERICA | <input type="checkbox"/> LITERACY |
| <input type="checkbox"/> AMERICANISM | <input type="checkbox"/> COMMUNICATION | <input type="checkbox"/> MEMBERSHIP |
| <input type="checkbox"/> ARRANGEMENTS | <input type="checkbox"/> HISTORIAN/SCRAPBOOK | <input type="checkbox"/> NEWSLETTER |
| <input type="checkbox"/> AWARDS | <input type="checkbox"/> HOSPITALITY/GREETER | <input type="checkbox"/> PHOTOGRAPHY |
| <input type="checkbox"/> BYLAWS | <input type="checkbox"/> LEGISLATION/POLITICAL EDUCATION | <input type="checkbox"/> TELEPHONE |
| <input type="checkbox"/> CAMPAIGN ACTIVITIES | <input type="checkbox"/> OPPORTUNITY DRAWING | <input type="checkbox"/> WAYS & MEANS |

ASSOCIATE MEMBERSHIP (No voting rights) Available to Men who are registered Republicans or Women who have Active membership in another Arizona Republican Women Federated Club or who are registered Republicans in another state.

IF ASSOCIATE - NAME OF AZ CLUB OR STATE OF RESIDENCE _____

ASSOCIATE ANNUAL DUES \$ 15.00 NEW OR RENEWAL (PLEASE CHECK ONE)

PLEASE CONTACT JANET JOHNS, 2ND VICE PRESIDENT, MEMBERSHIP AT 602-466-4680 WITH ANY QUESTIONS.

TO JOIN, COMPLETE THIS FORM AND RETURN WITH YOUR CHECK MADE PAYABLE TO ARW.

PLEASE MAIL TO LORELEI MENDIVIL, 21230 N 91ST LN, PEORIA, AZ 85382-5355

FOR ARW Use: Date dues were paid _____ Check # _____ Cash _____ Credit _____