

# REPUBLICAN WOMEN of CALIFORNIA - Fallbrook

PO Box 1328 Fallbrook, CA 92088

New ( )

Renewal ( )

Date \_\_\_\_\_

## Membership Application

Name \_\_\_\_\_  
Last First Initial Husband Birthday

\_\_\_\_\_ Address City State and Zip

Cell Phone # \_\_\_\_\_

Home Phone # \_\_\_\_\_

E-Mail \_\_\_\_\_

### Name Badge Order (\$5.00 per badge)

Name \_\_\_\_\_

Name \_\_\_\_\_

### Payment:

Annual dues: \$ \_\_\_\_\_

Name badges: \$ \_\_\_\_\_

Amount Paid: \$ \_\_\_\_\_

**Membership Level** *check one:*

( ) Full Member \$30      ( ) Joint with Husband \$40      ( ) Cash

( ) Ruby \$50      ( ) Diamond \$100      ( ) Check

( ) Associate Member \$15

*(Republican man or Member of another RWC club)*

( ) Transfer membership from other RWC club to this club

*Name of RWC Club in which you're a full member*

\_\_\_\_\_

### RWCF Scholarship Fund

I've included \$\_\_\_\_ with my membership for our RWCF Scholarship Fund  
*(please note on check)*

**Yes, I am a registered Republican** *(Signature)*

\_\_\_\_\_