

League of Women Voters of Indianapolis

Membership Form

Name(s): _____

Address: _____

Home Phone: _____ Work Phone: _____

Email: _____

Date: _____

I am a new member. Yes _____ No _____

I am a renewing member. Yes _____ No _____

(All members receive the Bulletin several times a year as well as other League literature and information.)

Scholarships/reduced dues are available for student memberships please contact the League.

Annual Dues (for Indianapolis, State and National):

___ Regular Member \$50.00

___ Two residing at same address \$75.00

___ Student/AmeriCorps Volunteer \$25.00

Contributions:

Your additional contribution helps the League of Women Voters make a positive impact on voting, citizenship and democracy.

___ To LWV-Indianapolis \$ _____

___ To help provide student member scholarships \$ _____

___ To LWV-Indianapolis Education Fund \$ _____

(tax deductible, must be paid with a separate check from membership dues)

I expect to be an active member _____, an occasional participant _____ or a supporter _____.

Which THREE topics interest you the most? (Circle three.)

Education, Natural Resources, Voter Service, Local Government Reform, Health & Welfare, Public Transit, Women's Issues, Other/Special Interest _____

May we call on you for any of the following? (Circle all that apply)

Contacting Members, Publicizing LWV Activities (PR), Tracking/Writing about an Issue, Serving on the Board of Directors, Observing Public Meetings, Registering Voters