

## Membership Application

Biannual Membership, 2024-2026

Applicant information	
Full Legal Name:	
	Zip:
Mailing Address (if different tha	n above):
	Zip:
Home Phone:	Mobile Phone:
Occupation:	Employer:
Employer Address:	
Membership eligibility	
Virginia, regardless of race, religion, Party are eligible to be members of thereafter, upon completing applicat	red as such in the City of Charlottesville under the laws of the Commonwealth of national origin or sex, who are in accord with the principles of the Republican the City Committee. Members are elected at the biannual mass meeting or tion form and paying the required dues, will be submitted to the next City ne Committee. (Committee Plan of Organization).
Signed:	Date:
Membership and dues, 2020-20	)22
I am applying for:	
RESIDENT MEMBERSHIP	<sup>2</sup> \$30 per person
■ NON-RESIDENT (ASSOC	SIATE) MEMBERSHIP <b>\$15</b> per person
Filing Instructions	

Mail this completed application form to: Charlottesville Republican Committee, 435 Merchant Walk Sq., Suite 300-122, Charlottesville, VA 22902. Include dues payment via check made out to Charlottesville Republican Committee.

Dues payment or additional contributions can also be made via the CRC website at https://www.charlottesvillegop.org.

Political contributions/donations are not tax deductible and subject to reporting requirements. Paid for and authorized by the Charlottesville Republican Committee.