

Membership Form

Please print clearly and fill out the entire form

Name

Birthday (Mo/Da)

Address

City and Zip

Telephone

Cell

Email (required for meeting updates)

Skills with which I can contribute:

Website Newsletter Media

Photography Hospitality

Legislation Fundraising

Awards Membership

Voter Registration Campaigning

Community Outreach As Needed

New/Renewing Member (\$30) \$ _____

Associate Member (\$15) \$ _____

Elected Official Member (\$100) \$ _____

TOTAL \$ _____

Please make check payable to: RWM

**Mail to: Susan Pierce
123 Montrose Drive
Madison, AL 35758**