

# YES! I want to help the work of the Women's democratic Club!

Enclosed is my donation in the amount of: \$ \_\_\_\_\_

Enclosed are my annual membership dues in the amount of: \$ \_\_\_\_\_

I would like to work on the following committees: \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_ Campaign Elections Support (Endorsements & Nominations)      \_\_\_ Programs (Hospitality and Issues)

\_\_\_ Fundraising (ERT & Scholarships)      \_\_\_ Membership

\_\_\_ I am unable to serve on a committee at this time

*Please make checks payable to: **Women's Democratic Club***

DUES:	LIMITED INCOME MEMBER	GENERAL MEMBER	FRIEND'S CIRCLE	BENEFACTOR'S CIRCLE	PRESIDENT'S CIRCLE
	___ \$20 -	___ \$50 -	___ \$100 -	___ \$500 -	___ \$1000 +

*Your membership expires December 31 of each year.*

**PLEASE PRINT** *(The following information is required for each membership & donation for reporting purposes)*

\_\_\_\_\_ WDC may share Name, Address, and phone # with other Democrats and Clubs

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Address \_\_\_\_\_

*THE FOLLOWING IS OPTIONAL:*

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_\_) \_\_\_\_\_

Fax (\_\_\_\_\_) \_\_\_\_\_ E-Mail \_\_\_\_\_

Referred by \_\_\_\_\_

**Women's Democratic Club, P. O. Box 20602, Riverside, CA 92516 - I.D. # 26-058-7388**

