

Membership Form

League of Women Voters of Kansas City,
Jackson, Clay, and Platte Counties
P.O. Box 10416, Kansas City, MO 64171



Date _____

Name _____

Name(s) of additional member(s) in household _____

Address _____

City/State _____

Zip Code _____

Phone (home) _____ Phone (work/day) _____

Cell phone _____ Email address _____

Dues: Please enclose a check to LWV/KC/J/C/P. Consider joining at a higher level, so we can continue working to educate and encourage voters in our community.

<input type="checkbox"/> Individual:	\$60.00	<input type="checkbox"/> Contributing:	\$125.00
<input type="checkbox"/> Household:	\$90.00	<input type="checkbox"/> Sustaining:	\$250.00
<input type="checkbox"/> Student:	\$30.00	<input type="checkbox"/> Suffragette:	\$500.00

*Your dues are tax deductible to the extent allowed by law. Please write your check to:
League of Women Voters of Kansas City/Jackson/Clay/Platte Counties, MO*

Thank you for helping the LWV/KC/J/C/P

MAKE DEMOCRACY WORK!