



# MEMBERSHIP APPLICATION/RENEWAL

Please complete this Membership Application form and mail to:  
**League of Women Voters of the Flint Area (LWVFA)**  
**P.O. Box 230, Flint, MI 48501-0230**

**Membership Categories:** Individual \$65 - Household \$35 each additional at same address - Student (16+) \$10  
**Membership & Program Year:** July 1 to June 30

Date: \_\_\_\_\_ Check One:  New  Renewal  Returning

Primary Member Name: \_\_\_\_\_

Name(s) of additional member(s) in household: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_ Alt Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Birthdates of each member: \_\_\_\_\_

Primary Membership Amount (\$65)	\$ _____	General Fund Donation	\$ _____
Household Membership(s) (\$35 each)	\$ _____	Scholarship Amount	\$ _____
Student (\$10 ea)	\$ _____	Education Fund [501(c)3]*	\$ _____

**Total Amount Enclosed: \$ \_\_\_\_\_**

**Please write your check payable to: LWV Flint Area or LWVFA**

**Note: Dues are not tax deductible but donations to the Education Fund\* may be deductible.**

**Please check all areas that interest you:**

- |   |   |
|---|---|
| <input type="checkbox"/> Voter Education and/or Registration                | <input type="checkbox"/> By-laws Review             |
| <input type="checkbox"/> Special events & Programs                          | <input type="checkbox"/> Membership                 |
| <input type="checkbox"/> Communications (newsletter, social media, website) | <input type="checkbox"/> Position Review & Research |

Other: \_\_\_\_\_

For more information, visit **LWVFlintArea.org** or e-mail us at **lwvflintarea@gmail.com**  
 The LWV Flint Area is a 501(c)(4) organization.

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LWVFA OFFICE USE: Received Date: \_\_\_\_\_ Check Number: \_\_\_\_\_ Sq Pmt? Y/N \_\_\_\_\_  
 LWVUS roster entry: \_\_\_\_\_ Constant Contact entry: \_\_\_\_\_ Thank You Letter sent: \_\_\_\_\_