MEMBERSHIP FORM/RENEWAL FORM

Membership Renewals due by Sept. 30

Date: _____

Name:_____ e-mail: _____

Home Phone: _____ Cell Phone: _____

Address: _____ Zip: _____ 2nd Address: _____

Membership (Circle one)

- ☐ Individual $60
- ☐ Student/Limited Income $20*
- ☐ Household $90 (2 members living at same address)

  Name of additional household member:

  _____

  E-mail of additional household member: _____

  Phone number of additional household member: _____
- ☐ Additional support: $20 $40 $60 $100 Other Amount: _____
- ☐ I want to donate $20 to sponsor a limited income member.

Total Enclosed: _____

All members with an e-mail address will receive the Voter newsletter by e-mail. Do you also wish to receive a print copy of the Voter newsletter? _____yes _____no

Make check payable to LWV Duluth & mail to:
Nancy Palmer, 444 Hartley Pl., Duluth, MN 55803 OR

To pay online, go to our website: lwvduluth.org

*** Dues assistance is available upon request. For information, please call our office at 218-724-0132 or e-mail us at lwvduluth@lwvmn.org**