**GRIMES COUNTY REPUBLICAN WOMEN**

**2025 MEMBERSHIP/RENEWAL APPLICATION (January 1- November 30)**

**Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Spouse \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have a Name Tag? Yes or No (if you circled Yes, then you will not need a new name tag)

How would you like your nametag to read? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Physical Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/County/State/Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: Home \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Member Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Publish in Directory? Yes / No

Spouse’s Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Publish in Directory? Yes / No

Member Birthday (Month/Day) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

 ( requirement of Texas Ethics Commission for PAC report)

Voting Precinct #\_\_\_\_\_\_\_\_\_\_ Congressional Dist. #\_\_\_\_\_\_\_\_\_\_ Senate District # \_\_\_\_\_\_\_\_\_\_\_\_

Please circle all of the following committee areas that you are especially interested in, so the Committee Chairs may contact you. Please complete this section even if you are not a new member.

Americanism Hospitality Outreach

Campaign Activities Legislation Publicity

Caring for America/Troops Literacy Telephone

Membership Ways and Means Historian/Scrapbook

 Newsletter Web Site Programs

Choose a membership status: Cash or Check #\_\_\_\_\_\_\_ New Membership \_\_\_\_\_ Renewal \_\_\_\_

 Active (Primary member) $35 \_\_\_\_\_\_\_\_\_

Associate (Male) $15 \_\_\_\_\_\_\_\_\_

Associate (Female) $15 \_\_\_\_\_\_\_\_\_ (holds Active Membership in another RW Club)

 Primary Club Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Young Affiliate Member $ 5 \_\_\_\_\_\_\_\_\_

Please make check payable to GCRW and mail with this form to:

**GCRW Membership/Tina Hector, PO Box 4, Plantersville, TX 77363**

GCRW is a PAC. A donation is not tax deductible as a charitable contribution.

For More Information: GrimesCRW@gmail.com