



**MEMBERSHIP/RENEWAL FORM**

All applicants are asked to complete this registration form. Membership runs from Jan 1<sup>st</sup> - Dec 31<sup>st</sup>.

NEW MEMBERSHIP       RENEWAL

**SECTION 1: MEMBER/ASSOCIATE CONTACT INFORMATION**

NAME		ASSOCIATE	
CELL #		CELL #	
HOME #		MEMBER'S ELECTED OFFICE (if applicable)	
ADDRESS			
CITY		ASSOCIATE'S ELECTED OFFICE (if applicable)	
ZIP			
EMAIL			
ASSOCIATE EMAIL			

**SECTION 2: MEMBERSHIP TYPE AND PAYMENT DETAILS**

MEMBER TYPE	DESCRIPTION	MEMBERSHIP DUES (ANNUAL)	Total
FULL	Full Membership	\$50	
ASSOCIATE	Associate membership is open to men who wish to support the mission and objectives of RWU	\$25	

Referred By \_\_\_\_\_

**With my signature, I certify that I am registered to vote as a Republican.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Your full membership dues include membership in Republican Women United, the Kansas Federation of Republican Women, and the National Federation of Republican Women.

Make check payable to **RWU** and mail with form to:  
**Republican Women United**  
**PO Box 2603**  
**Wichita, KS 67201**

EMAIL: [Republicanwomenunitedks@gmail.com](mailto:Republicanwomenunitedks@gmail.com)  
 Facebook: [@republicanwomenunited](https://www.facebook.com/@republicanwomenunited)  
 Website: [republicanwomenunited.net](http://republicanwomenunited.net)