

MEMBERSHIP APPLICATION
for
NEW CLUB



NEW YORK STATE FEDERATION OF REPUBLICAN WOMEN
315 State Street
Albany, New York 12210

DATE _____

WE, THE _____
(Club Name)

HEREBY APPLY FOR MEMBERSHIP IN THE NEW YORK STATE FEDERATION OF
REPUBLICAN WOMEN.

PRESIDENT: _____

Address: _____

Telephone: _____

SECRETARY: _____

Address: _____

Telephone: _____

TREASURER: _____

Address: _____

Telephone: _____

CLUB'S MAILING ADDRESS: _____

President's Signature

Judicial District Director's Signature

**NEW CLUB
APPLICATION for MEMBERSHIP**

NATIONAL FEDERATION OF REPUBLICAN WOMEN
124 N. Alfred Street
Alexandria, Virginia 221314

DATE _____

CLUB NAME _____

DATE ORGANIZED _____

DUES and SERVICE CHARGE PAID: _____

Members _____

Service Charge _____

PRESIDENT: (Name) _____

Address: _____

CERTIFICATION:

This Club has fulfilled all requirements of our Federation for membership.

Bylaws have been approved: _____

Proper Officers have been elected: _____

They have been approved by our State Federation _____

Signed

State Federation

State Federation President

Address
