



MEMBERSHIP FORM

****You may also renew and pay ONLINE at <https://gcrw.org/membership/>.****

SECTION 1 – ARE YOU A NEW OR RENEWING MEMBER?

- Renewing Member** – Are there changes to be made to your prior membership information?
 - No** (complete SECTION 3 - PAYMENT)
 - Yes** (complete SECTION 2 – MEMBER INFORMATION)

Please AFFIRM the following statement by initialing afterwards: *“I am aware that GCRW will publish my information as previously provided to GCRW, either directly or indirectly, in the annual GCRW member directory, including but not limited to my address, email, phone number, precinct, Senate district, and House district. I am aware this directory is distributed to all members and the public, and I give GCRW permission to publish my information.”* _____ (INITIAL HERE)

****If you need to change any information for the GCRW directory, please make those changes in Section 2 – Member Information and complete the Important Notice and Consent to Publish in that section.****

- New Member** – Complete SECTION 2 – MEMBER INFORMATION and SECTION 3 - PAYMENT

SECTION 2 – MEMBER INFORMATION

Member Name: First _____ Last _____

Spouse’s Name: First _____ Last _____

Is your spouse a current GCRW member? Yes No

Is your spouse also joining GCRW? Yes No

****If yes on either, please complete a separate Member Form for your spouse****

Address: Street: _____

Apt / Ste / Bldg #: _____

City: _____ State: _____ Zip: _____

County of Residence: _____

Email Address: _____

Can we add you to the GCRW email list? Yes No

Preferred Phone Number: _____

Is this your home, cell, or work phone number?

Birthday Month: _____ Day: _____

Precinct #: _____

Senate District: 2 8 30 Other: _____

House District: ___33 ___61 ___66 ___67 ___70 ___89 Other: _____

IMPORTANT NOTICE AND CONSENT TO PUBLISH:

GCRW may publish an annual directory that is distributed to all members. The directory may include all the Member Information in Section 2. Do you give GCRW permission to publish all information listed in Section 2 of this Membership Form? ___ Yes ___ No

If you stated "NO" to the **Important Notice and Consent to Publish**, please specify what you do not consent to publication and if applicable, provide alternative information (address, email, phone, etc.) below:

Are you interested in serving on the GCRW Board? ___ Yes ___ No
Are you interested in serving on a GCRW committee? ___ Yes ___ No
Are you interested in helping with GCRW campaign efforts? ___ Yes ___ No
Are you interested in helping with GCRW community outreach? ___ Yes ___ No

SECTION 3 – PAYMENT

MEMBERSHIP TYPE:

- FEMALE - Primary Club Member (\$35)
- FEMALE Associate (\$25) = GCRW is **NOT** your primary club. The name of your Primary Club is:

- MALE Associate (\$25) YOUTH Affiliate (\$10).

FORM OF PAYMENT:

- Check Enclosed - Amount: \$_____.00
- Cash Enclosed - Amount: \$_____.00

Are you interested in learning about becoming a Patron Member of GCRW? ___ Yes ___ No
If yes, may someone contact you directly about becoming a Patron Member? ___ Yes ___ No

Please mail your completed Member Form and payment to:

**Golden Corridor Republican Women
Attn: V.P. Membership – Lené Alley DeRudder
P.O. Box 162 Frisco, Texas 75034**

Still have questions about GCRW membership? Please contact our V.P. Membership, Lené Alley DeRudder, at laderuddergcrw@gmail.com.

***THANK YOU for joining Golden Corridor Republican Women!
We are grateful for your membership and involvement!***

GOLDEN CORRIDOR IS A NON-PROFIT ORGANIZATION PURSUANT TO SECTION 501(c)(3) OF THE UNITED STATES INTERNAL REVENUE CODE.