



Yes, I'd like to join as a member of the Libertarian Party of Connecticut! To validate my membership, I certify that I do not advocate the initiation of force or fraud (coercion) as a means of achieving political or social goals

_____ signature

<u>#1 Membership Level</u>	<u>#2 Contribution Method</u>
<p><input type="radio"/> \$30</p> <p><input type="radio"/> \$60</p> <p><input type="radio"/> \$120</p> <p><input type="radio"/> \$300</p> <p><input type="radio"/> \$600</p> <p><input type="radio"/> \$_____ other</p>	<p><input type="radio"/> Check (Make checks payable to the Libertarian Party of Connecticut)</p> <p>Credit card</p> <p><input type="radio"/> Visa <input type="radio"/> MC <input type="radio"/> AmEx <input type="radio"/> Disc</p> <p>Card Number: _____</p> <p>Name as it appears on card: _____</p> <p>Expiration Date: _____ CSC: _____</p> <p>Signature: _____</p>
<u>#3 Personal Information</u>	
<p>First Name: _____ M.I. _____ Last Name: _____</p> <p>Street Address: _____ City: _____</p> <p>State: _____ Zip: _____ Phone: _____ Email: _____</p> <p>Employer: _____ Occupation: _____</p>	

Please return this form to the address below. Thank you for your support!

Membership LPCT P.O. Box 4069 Yalesville, Connecticut 06492