

**LEAGUE OF WOMEN VOTERS, FREDERICK COUNTY
MEMBERSHIP APPLICATION**

Name _____

Phone: (H) _____ (W) _____

Address _____

Zip _____ County _____

E-Mail _____

Additional Household Member(s)

Member (must be US citizens age 18 older)

Member Annual Dues, \$60 \$ _____

Additional Household Members Annual Dues @\$25 each \$ _____

A contribution to the League further promotes our good work.
A direct contribution to the LWV-Frederick County \$ _____

A tax-deductible contribution to the Maryland Voters Education Fund \$ _____

TOTAL REMITTED \$ _____

MAKE CHECKS PAYABLE TO: LWV-Frederick County and mail to:
LWV of Frederick County, MD
416 Fairview Ave
Frederick, MD 21701