

Membership Application

Republican Club of Hanover

255 W. Chestnut St.

Hanover PA. 17331-2914

COMPLETE ENTIRE APPLICATION (Please Print Legibly!)

1. Name _____ [First] [Middle] [Last]

_____ (Current Street Address)

_____ (County) _____ (City) _____ (State) _____ (Zip Code)

Email Address _____

Voting District _____ Registration Number _____ [Borough or Township] [if known]

If you lived at the above address less then one year, please give previous address.

Previous Address _____

County _____ City _____ State _____ Zip _____

Voting District _____ [Borough or Township]

2. Copy of Identification: example (drivers license, photo I.D., Military I.D.)

3. Place of employment & Occupation _____

4. Date of Birth _____ Home Phone # _____

5. Registered as [check one] Republican _____ Democrat _____ Other _____ Not Registered _____

6. Sponsors -Three required, including one Board member

Sponsor: Name & Address _____

Membership # _____ [Phone] _____

Co-Sponsor: Name & Address _____

Membership # _____ [Phone] _____

Sponsoring Board Member _____

7. What other clubs or organizations are you a member of: _____

If accepted, I agree to abide by all bylaws and regulations of the club; to notify the secretary of any address changes or status in political registration; and to pay yearly dues by December 31 of each calendar year or suffer loss of membership. Dues, Fees, and contributions are non-deductible for Internal Revenue Service Tax purposes. Application fees are non-refundable.

This application is to be accompanied by a fee of \$ 55.00 [\$25 initiation fee and \$30 for the current calendar year dues. I am not eligible to enter the club until approved by the Executive Committee, and have in my possession a membership card and door key.

Please enclose an additional \$5.00 with your application if you need a door key\fob.

If you would like to use a card from another organization enter card number _____

8. New members can pick up their by-laws and door key 1 week after the Board meeting.

[Signature] _____ Date ___/___/___

Information Below To be filled out by club personnel

Date Received _____ Money Received # _____ MEMBER. Number # _____

Person accepting application _____ Membership Comm. OK _____