

League of Women Voters of The Houston Area MEMBERSHIP APPLICATION

To have an impact in our community, the League depends upon a large, diverse membership. If you are a U.S. citizen age 18 or over, we invite you to join with us in our studies and receive informative League publications including the monthly **Houston Voter** newsletter, **Voter Guides** prior to an election, **Voter Keys** containing names and addresses of elected officials, and the quarterly **State and National Voters** publications.

Print this form, fill it out, and mail it with a check to the League address shown below.

Primary Member Name _____ Date of Birth ____/____/____

Household Member Name (if Applicable) _____

Number of Children under age 18 in household _____

Address _____

City _____ State ____ Zip _____ E-mail _____

Home phone _____ Work phone _____ Fax _____

Employer (if Applicable) _____

Job Title _____

Spouse's Employer (if Applicable) _____

Job Title _____

Students complete: School Name _____ Hours _____ Student: ID# _____

Prefer to attend meetings: ___ Day ___ Night ___ Cannot Attend

Individual Membership -- \$58.00

Additional Household Members -- \$29.00 each

Student Membership -- \$25.00

Print this form, fill out, and mail it with a check payable to:

League of Women Voters of The Houston Area

2650 Fountain View, Suite 328

Houston, TX 77057

Phone: (713) 784-2923 | Fax: (713) 784-2984 | Email: [League Office](#)

Have you ever been of member of LWV? If so, where _____ When _____

Describe your involvement _____

How did you hear about us? _____

Updated: Fri, Aug 11, 2006