

WINNIPESAUKEE REPUBLICAN COMMITTEE

Membership Application

(Please Write Legibly)

Name of Applicant: _____

Mailing Address: _____

Phone - Mobile: _____ Home: _____

Email Address: _____

Occupation / Employer Information: _____

I am registered to vote in (State and Town): _____

I am registered as (circle one): Republican / Undeclared / Other (specify): _____

I am applying for (circle one): Full / Associate Membership

CERTIFICATION: The information provided on this application is true and correct. I support the ideals and principles of the Republican Party, wish to take an active role in promoting and supporting the activities of the Winnepesaukee Republican Committee, and agree to follow the rules and procedures adopted by the Committee.

Signature: _____ Date: _____

APPROVED:

By: _____ Date: _____