



BEACH CITIES REPUBLICANS MEMBERSHIP FORM

* For BCR Use Only *

Circle one: Mr./Ms./Mrs./Miss/Dr./Hon. | Date: _____

Name: _____ Spouse Name: _____

Employer: _____

Job Title: _____

Spouse Employer: _____

Job Title: _____

Home Street Address: _____

City/State/Zip: _____

Phone (Circle) Office/Home/Cell _____

Spouse Phone (Circle) Office/Home Cell _____

E-mail #1 _____

E-mail #2 _____

Current/prior elective offices held (dates): _____

Signature: _____ Date: _____

I am a Registered Republican.

I authorize the BCR to disclose my membership.

Spouse Signature: _____ Date: _____

I am a Registered Republican.

I authorize the BCR to disclose my membership.

Membership: NEW RENEWAL GIFT

Level: STUDENT \$10 REGULAR \$25 COUPLE \$40 "BECAUSE I CAN" \$50

EXECUTIVE \$100 CLUB SPONSOR \$500 LEADERSHIP CIRCLE \$1,000

Interests: (check as many as you want)

Voter registration Walk precincts Phone calls/phone banks

Online/digital/social media Letters to the editor School/youth programs

Events/rallies/protests Fundraising Technology/databases

Club leadership Run for elective office Other _____

How did you hear about us? Friend Email Website Newspaper Other _____

Please make check to Beach Cities Republicans / Contributions NOT deductible for income tax purposes

Mail to: Peter Michel / Attn.: Beach Cities Republicans P.O. Box 1043, Palos Verdes Estates, CA 90274-7843

www.lagopclubs.com or Connect with us @ <http://www.facebook.com/BeachCitiesRepublicans>