



*The League of Women Voters Jackson Area*  
*Empowering Voters                      Defending Democracy*

**MEMBERSHIP FORM**

New Membership and/or Renewal of Membership

Please complete this form and mail to:

LWVJA  
P.O. Box 1886  
Jackson, MI 49204  
DATE \_\_\_\_\_

Membership is open to everyone age 16 and older. Membership in a local League includes membership in the state and national leagues.

**Dues Assistance Option**—LWVJA offers supplemental dues assistance to individuals on a case-by-case basis. See full policy on our website under Join/Renew. Please contact a LWVJA Board Member to discuss.

\_\_\_\_\_ **New Membership**                      \_\_\_\_\_ **Renewal**

There are three types of local League membership:

\$ \_\_\_\_\_ **\$75.00: Individual Membership** - annual membership for one person supports the League efforts:

- \$32 – National
- \$23.90 – State of Michigan
- \$19.10 - Local Jackson Area

\$ \_\_\_\_\_ **\$112.50: Household Membership** - annual membership for two people who share the same address.

\$ \_\_\_\_\_ **\$ 5.00: Student Membership** - annual membership for one person currently enrolled as a full time student.

\$ \_\_\_\_\_ **Additional donation:** Please consider adding a contribution to your dues to help support local programs. Membership donations provide a major source of money for our local League, plus grants and fundraising. Your donations are greatly appreciated and go to support voter guides, candidate forums, local advocacy, citizen education activities and communications with membership.

\$ \_\_\_\_\_ **TOTAL**                      (Membership dues and contributions are not deductible as a personal or business expense for tax purposes. We are a 501(c)(4) organization).

Make check payable to:

LWVJA  
P.O. Box 1886  
Jackson, MI 49204

**OR** use our **PayPal** account: LeagueWVJackson@gmail.com (Service fees applied:\$2.50 for Individual; \$4 for Household)

**Name(s):** \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Primary Phone \_\_\_\_\_

Second Phone \_\_\_\_\_

**Name (second household member):**

Email: \_\_\_\_\_

Primary Phone \_\_\_\_\_

Second Phone \_\_\_\_\_

**Thank you for Helping Make Democracy Work!**