



# Clear Lake Area REPUBLICANS



Return mail to: P.O. Box 590444, Houston, Texas 77259-0444

First and Last Name*	Occupation*	Home Telephone ( ) -	
Street Address*	Employer*	Work Telephone ( ) -	
City, County, State, Zip Code	Mobile Telephone ( ) -		
E-mail Address	Voter Registration #	Precinct Number	Precinct Chair? <input type="checkbox"/> YES <input type="checkbox"/> NO

\*Required information by Texas Ethics Commission

### Select any interests in which you would like to volunteer

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Community Outreach           | <input type="checkbox"/> Membership Development        | <input type="checkbox"/> Club Socials            |
| <input type="checkbox"/> Public Information Marketing | <input type="checkbox"/> Public Policy/Issues Research | <input type="checkbox"/> Candidates Fund Raisers |
| <input type="checkbox"/> Programs/Speakers            | <input type="checkbox"/> Other _____                   | <input type="checkbox"/> Legislative Support     |

### Membership Contribution

#### Annual Contribution

- Individual: \$20.00  
 Family: \$30.00

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

#### Lifetime Contribution

- Individual: \$100.00  
 Family: \$150.00

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**OR**

Spouse's Name (family membership) \_\_\_\_\_

OFFICE USE ONLY	Date Member Approved:	OFFICE USE ONLY
	Date: ____/____/____	
	Amount: _____	
	Funded: ____/____/____	
Treasurer: _____		