

Please print this page and fill out the Membership Information Form. Then mail it with your check to:

League of Women Voters of Greeley-Weld County, Inc.
P.O. Box 336634
Greeley, CO 80633

This form may also be filled in online and printed.

MEMBERSHIP FORM

Name _____

Name(s) of additional member(s) in household _____

Address _____

City _____ Zip Code _____

Phone (home) _____ Phone (work/day) _____

Cell phone _____ Email address _____

Amount enclosed \$ _____

\$65.00 one member. \$97.00 two members same household.

___ Student Member. There is no fee to join. We encourage your membership and participation.

Dues are not tax deductible. Please write your check to: League of Women Voters of Greeley-Weld County, Inc.

_____ Donation -- (Donations to the Education Fund are tax deductible. Please write a **separate check** for your donation.)

Comments (e.g. interests, how you heard about the League)

[Contact us](#) for more information.

We are a 501(c)(4) organization.