



Carroll County Republican Women Membership Application 2026

Name: _____ Date: _____

Address: _____

Cell Number: _____ Home Phone Number: _____

E-MAIL: _____

(Please print email clearly and notify us of changes. This is our preferred means of communication)

Application: New ____ Renewal ____ Referred By: _____

ANNUAL DUES ARE FOR JANUARY 1 THRU DECEMBER 31

(New members joining October 1 thru December 31 are full members effective January 1 and non-voting members for remaining of current year)

PLEASE CHECK ONE:

- \$30 PRIMARY MEMBERSHIP:** Open to any registered Republican woman who is loyal to the Republican Party.
- \$35 RUBY— MEMBERSHIP:** Primary membership with additional \$5 donation to CCRW
- \$40 EMERALD MEMBERSHIP:** Primary membership with additional \$10 donation to CCRW
- \$45 DIAMOND MEMBERSHIP:** Primary membership with additional \$15 donation to CCRW
- \$25 ASSOCIATE MEMBERSHIP:** Any woman who is a Registered Republican, and already a primary member of another club.
- \$25 ASSOCIATE:** Any man who is a Registered Republican and supports CCRW
- \$100 PATRIOT:** Sustaining support that helps us strengthen our outreach and inform voters in our communities

I am a registered REPUBLICAN and I will support Republican ideals and encourage loyalty to the Republican Party.

SIGNATURE _____ **DATE** _____

COMMITTEES/INTERESTS: Please indicate the area(s) in which you have an interest!

- Literacy
- Fundraising
- Publicity/Media
- Campaign Activities
- Legislative
- Membership
- Community Outreach/Service
- Scholarship
- Caring for America (Support Troops)
- I CAN HELP WHERE NEEDED.**
- YOUR talents or interests _____

Special talents (graphics design, website, database, editing, writing, etc.)

Issues that concern you _____

Please complete this application and return with your check made to: CCRW

MAIL TO: Deb Peterson, 7 East Geneva Street, Mt. Carroll, IL 61053

www.carrollcountyrepublicanwomen.com