League of Women Voters of Tompkins County

Web: www.lwvtompkins.org Email: lwvtc@twcny.rr.com

MEMBERSHIP FORM

Membership automatically makes you a member at the national, state, and local levels.

Name: _____
(please print) Mrs. Ms. Miss Mr. First Last

Name: _____
(2nd person if household) Mrs. Ms. Miss Mr First Last

Address: _____
Street City Zip
Phone: _____Cell _____ Best time to call ____day ____evening

Email: _____

MEMBERSHIP FEE (not tax deductible) & BULLETIN

_____ $55/year Individual - Receive Bulletin by email
_____ $25/year Student
_____ $85/year Household
_____ plus $10 to receive Bulletin by U.S. Mail OR
_____ plus $5 to receive Bulletin in Kendal Box
_____ CONTRIBUTION Non Tax Deductible - used for all League activities including action and advocacy
_____ TOTAL Amount Enclosed (payable to LWV-TC)

TAX DEDUCTIBLE CONTRIBUTIONS for education purposes, please use a separate check payable to the Community Foundation of Tompkins County and write "LWV-TC Education Fund" on the memo line.

A "Friend of the League" is not a member, but supports the work of the League of Women Voters by making a contribution to the LWV-TC or the Community Foundation.

WAYS TO BE INVOLVED (please check all that apply):
____ Voter Service ____ Program Committee ____ Board of Directors
____ Health Committee ____ Natural Resources ____ History Project
____ Students Inside Albany Selection Committee
____ Observe government or school board meetings _____
(specify Town, Village or School District)
____ One Time Jobs ____ Other (specify) _____

MAIL TO: LWV-TC c/o Alene Wyatt, 396 Savage Farm Drive, Ithaca, NY 14850