MEMBERSHIP APPLICATION



Name:	Phone:			
Residential Address:				
City:	State:	Z	ː ip:	
PO Box:City:	State:		Zip:	
Email:				
Name of Spouse, if joining:				
Occupation:				
Employer*:				
(*Required by Washington State PDC)				
Employer Address:		State	Zip	
Pend Oreille Precinct you reside in, if known.	Precinct:			
Precinct Committee Officer Name, if known:				

For information ONLY

Annual Membership Dues: \$30 Adult, \$45 Couple, \$20 Seniors (70 & over) Foreign Members (out of county property owners) \$30 Adult, \$45 Couple

Do not send money or check at this time!

Mail to: Pend Oreille County Republicans

William Bisson PO Box 413

Metaline, WA 99152