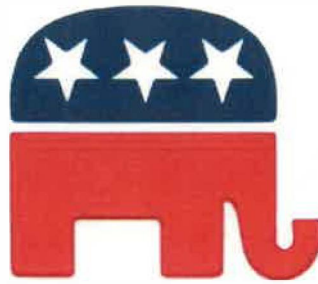


Cumberland County Republican Committee  
2 year Membership Form

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



\*Membership expires bi-annually at the meeting prior to the mass meeting. You must complete this form bi-annually. Membership will be considered at the next meeting.

Name: \_\_\_\_\_

Address: \_\_\_\_\_ District: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Please check all that apply:

- Yes, I will pay the \$20 voluntary membership fee to defray the cost of running the committee
- Yes, I will make phone calls on behalf of our candidates
- Yes, I will participate in door to door opportunities.
- Yes, I will participate in recruiting friends and neighbors in being involved in the process.

Signature: \_\_\_\_\_

Paid for and authorized by the Cumberland County Republican Committee