

LEAGUE OF WOMEN VOTERS OF ARLINGTON
Membership Application/Renewal Form

****Fiscal Year runs from April 1 to March 31****

Name _____ Precinct _____ Date _____
Address _____ Zip _____ Occupation _____
Telephone _____ Email _____

____ Please indicate if you do NOT want your contact information sent to Arlington League members

____ Basic Membership Dues..... \$60
____ 2nd member in household \$23
____ Student (full-time) \$20
____ Contribution to help the LWV in Arlington, add \$ _____
TOTAL ENCLOSED \$ _____

If \$60 is a hardship, please pay what you can and let us know that this is your dues payment.

MAKE CHECKS PAYABLE TO: League of Women Voters of Arlington
MAIL TO: Ann FitzGerald, 162 Summer St., Unit 1, Arlington, MA 02474

Please check areas of interest and activity even if you can't be actively involved THIS year.

SPECIAL LEAGUE ACTIVITIES

- ____ Action: phone calls _____ letters _____
- ____ Bulletin: mailing _____ soliciting ads _____
- ____ Membership
- ____ Nominating Committee
- ____ Publicity
- ____ Voter Service: Rides to the polls _____
 - ____ Candidates Night
 - ____ Voters' Guide
- ____ Host a meeting in my home

FOLLOW ISSUES, KEEP LEAGUE AND COMMUNITY INFORMED

- ____ Congress/Presidency/Election Process
- ____ Discrimination/Equal Employment/Civil Rights
- ____ Education
- ____ Environment/Climate Change
- ____ Health Care
- ____ Justice/Courts/Prisons
- ____ Housing/Zoning/Community Development
- ____ Taxation/Budgets/Deficits
- ____ Transportation/Urban Policy
- ____ Voting Rights
- ____ Basic Human Needs
- ____ Women's Issues/Gender Issues
- ____ Housing/Zoning/Community Development
- ____ Other

OBSERVE AT TOWN BOARD MEETINGS*

- ____ Select Board (Mondays)
- ____ Redevelopment Board (Mondays)
- ____ School Committee (2nd & 4th Thursdays)
- ____ Conservation Commission
- ____ Housing Authority

SKILLS LEAGUE COULD DRAW ON

- ____ Writing articles
- ____ Computer spreadsheet
- ____ Desktop publishing
- ____ Website management
- ____ Moderating meetings
- ____ Membership development

*Some of these can be seen on cable TV

Please add my name, street address, phone number, and email address to the LWVA mailing list: ____ Yes ____ No

(Note: This information will not be sent to anyone outside the LWVA)