Roanoke Valley Democratic Women

Membership Form 2023

Annual Dues: $20.00

(Please print.)

_____

First Name MI Last Name

_____

Street Address

_____

City, State Zip

_____ _____ _____

Cell Phone Home Phone Work Phone

___ 1-Year Membership or ___ 2-year Membership

___ Cash or ___ Check (Check No. _____)

___ New or ___ Renewal

Signature: _____ Date _____

Please make check payable to the **ROANOKE VALLEY DEMOCRATIC WOMEN.**

Mail completed form and check to:

Roanoke Valley Democratic Women
Wanda Ostrander, Treasurer
2368 Howard Road
Roanoke, VA 24015

(For office use.)

Date Received: _____ Amount: _____

Check No: _____ Posted: _____

Signature: _____