



MEMBERSHIP APPLICATION

First Name: _____ Middle Initial: _____ LastName: _____

Mailing Address: _____ Apt/Unit# _____

City: _____ State: _____ Zip Code: _____

Cell Phone: _____ Home Phone: _____

Email: (Please Print Clearly) _____

Type of Membership: (Circle) Individual Couple

Applicant Signature: _____

Date Dues Paid: _____ Cash _____ Check# _____

Annual Membership	\$30.00
Couple	\$50.00

Please Consider Joining One Of Our Committees

Ways and Means	<input type="checkbox"/>	By-Laws	<input type="checkbox"/>
Planning & Operations	<input type="checkbox"/>	Candidate Support	<input type="checkbox"/>
Public Relations	<input type="checkbox"/>		

Make Checks Payable To: The Horry County Republican Party
PO Box 70665-Myrtle Beach-South Carolina-29572

Treasurer John "Griff" Griffith Email: jgriff413@gmail.com