



Application for Membership

Passaic County Republican Organization, Inc.
Hawthorne Republican Club
P.O. Box 440 | Hawthorne, NJ 07506

Application type: ☐ New ☐ Renewal Date: _____

I, _____, the undersigned, being a Republican of voting age, respectfully apply for membership in your organization and, if accepted, promise to support its Constitution and Bylaws.

Occupation: _____

Residence: _____

Phone: _____ Email: _____

Type of Membership Desired Check one

Membership	Check Payment	Venmo Payment	Select
Regular Membership	\$24.00 per year	\$24.72 per year	_____
Senior Citizen Membership	\$12.00 per year	\$12.36 per year	_____
Student Membership	Free until graduation	Free until graduation	_____
Life Membership	\$175.00 one time	\$180.25 one time	_____

Payment Options

☐ **Check enclosed** - Make payable to HRRO and mail with this application to the address above.

☐ **Venmo payment** - Pay @hawthornerepublicanclub or scan the QR code. Use the Venmo amount listed above, which includes the transaction fee.

Signature of Applicant: _____

Proposed by: _____



Hawthorne Republican Club
@hawthornerepublicanclub



venmo

First Year Dues Must Accompany This Application

For Membership Committee Only

Voting Status Verified: _____ Residence: _____

Approved: _____ Not Recommended: _____

Entered on Membership Roll: _____ Membership Card Mailed: _____
(Date) (Date)

Membership Committee Chairperson: _____ Date: _____