



REPUBLICAN FEDERATED WOMEN OF THE VILLAGES MEMBERSHIP **APPLICATION 2026**

*** ALL MEMBERS MUST BE REGISTERED REPUBLICANS ***

APPLICANT DATA (Please print)

Full Name		Date of Birth	
<input type="text"/>		<input type="text"/>	
EMAIL		Cell Phone	
<input type="text"/>		<input type="text"/>	
Street	City	ST	Zip
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

GETTING TO KNOW YOU

How long have you lived in the villages _____ Which Village? _____

Full Time ____ Part Time ____ Months Here ____ Referred by: _____

Are you a Registered Republican? _____ Where you in the Military? _____ If yes Branch _____

Where did you Live before coming to the Villages? _____

Current or Former Occupation _____

Have You Ever been a member of a Republican Federated Woman's Club? ☐ YES ☐ NO

If Yes Where? _____ What Club? _____

PLEASE CHECK THE COMMITTEE YOU WOULD LIKE TO HELP WITH

<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Achievement Awards	Social Media / Communication	Literacy / Education
Armed Services	Fundraising & Sponsorship	Membership
Americanism	Historian	Prayer Warriors
Campaign Activism	Hospitality / Social	Voter Integrity
Caring for America	Legislative Affairs	Other
If Other, please explain: _____		

2026 MEMBERSHIP FEES

MEMBERSHIP Full ☐ \$45 1 Year ☐ \$7.00 Name Tag Print Name: _____

Associate ☐ \$25 1 Year ☐ \$7.00 Name Tag Print Name: _____

Member Signature: _____

NOTE ASSOCIATE MEMBERS: Cannot vote, but they can serve on committees

PAYMENT BY MAIL

Total paid \$ _____ Today's Date _____ Cash ☐ Check # _____

Make Checks Payable to RFWTV Mail to RFWTV 333 Colony Blvd The Villages FL 32162