

Josephine County Republican Women

Membership & Renewal Application
Effective January 1 – December 31, 2026

Club meetings are held on the 3rd Tuesday of each month at Code 4 Tap House, 515 Rogue River Hwy, Grants Pass, OR 97527 (where the old Herbs Restaurant used to be). The meeting is located in the back room of the Tap Room, from 12noon-1pm. If you would like to order food and/or visit with other members prior to the meeting we recommend arriving early, as early as 11am.

Just to let you know, as per our Bylaws, we allow two visits before we ask you to join.

Annual club dues are \$40 for new members; new associate members' dues are \$20. Associate members are non-voting positions and are men or women, and women with membership in another Federated Republican Women's club.

Name: _____ Date: _____

Address: _____

City/State/Zip: _____ Phone: _____

Email : _____ Referred by : _____

____ **I am a registered Republican. ** required for both full and associate members ****

____ **I am a biological female.** (required for full members)

(check all that apply):

____ applying for new membership ____ renewing full membership (\$40) ____ applying for
associate membership ____ renewing associate membership (\$20) ____ I need to update
contact information. Please make the following changes _____

Optional: Name badges are \$12.50 (pin) or \$14.00 (magnet). Please write how you want your
name to appear: _____

Please include payment with your application. Make checks payable to **JoCRW**. Bring your
completed application to the next meeting or mail it to: JoCRW PO Box 2461 Grants Pass, OR
97528. Cash or checks are preferred, but we do take credit cards with Square at the meetings.

Required: Your signature: _____

Falsifying any information may result in termination of your membership.

For more information about the club or an RSVP for lunch, email josephinecountyrepublicanwomen@gmail.com

*****For club use only*****

Person receiving payment: _____ Amount received: _____

Paid by: _____ Check # _____ Cash ____ Square ____ / Dues amount: _____ Badge
amount: _____ Membership notified: _____ Funds passed to Treasurer: _____