



Memberships expire 12-31-2024. Membership or support of another political party terminates this Membership.

## 2024 Annual Membership Form

Name (1)				
Email (1)				
Name (2)				
<b>Email</b> (2)				
Address			City	ZIP Code
Phone (1)	Pho	ne (2)	•	
I can Help with the	e following for the V	ernon C	County Republ	
8	☐ Make Phone Calls			
☐ Help with Events	☐ Letters to the Editor	☐ Help with Campaign Signs		
☐ Help with Headquarters	☐ Be a Poll Worker	☐ Help with the Fair Booth		
	☐ Participate on Facebook	☐ Be a convention delegate		
☐ Other Single Men	nbership \$10			
	mbership \$20 [] List addition	al names on	back	
Additional	Donations			
Total for M	ations	Like us on F	acebook	
☐ I prefer U.S. Mail for Event Information			VernonCountyGOP.com	
Mail check to: Verno Rhon S5450 Viroq	rty	Email chair@vernoncoun  Questions, call the 608-606-0738, Roge Form 2022 Annual_2	Chairman at er Call	