



MCRW MEMBERSHIP APPLICATION

Date _____ Payment: Cash _____ Check _____ New: _____ Renewal: _____

Membership Preference:

Primary Regular \$40 _____ Dual (F) \$30 _____ Associate (M) \$30 _____

Primary Patron \$100 _____ Dual Patron (F) \$100 _____ Associate Patron(M)\$100 _____

Last Name: _____

First Name: _____ Spouse Name: _____

Address: _____

City: _____, Texas Zip: _____

Cell Phone: _____ Alternate Phone: _____

Email Address (print): _____

Occupation: _____

Referred by: _____

Preferred method of contact: Email Cell Phone Alternate Phone

Make checks payable to MCRW PAC.

No corporate checks permitted.

Mail to:

P O Box 4024

Midland, Texas 79704

LET'S MAKE AMERICA GREAT!

**Upon payment your membership will be active until December 2021 *MCRW will communicate with members by email unless notification by member specifies otherwise. Text messages will be sent for meeting reminders and special events.*