



State Membership Form

Use only for non-local League memberships

Please print this page and fill out the Membership Information Form. Then mail it with your check to:

League of Women Voters of North Carolina
PO Box 2231
Chapel Hill NC 27515-2231

MEMBERSHIP FORM

Name _____

Name(s) of additional member(s) in household _____

Address _____

City _____ Zip Code _____

Phone (home) _____ Phone (work/day) _____

Cell phone _____ Email address _____

Amount enclosed \$ _____

\$45 for one member. \$55 for two members same household. Other available membership categories: Annual dues, full time student: \$22.50

Please write your check to: League of Women Voters of North Carolina
Dues are not tax deductible.