



LCRC MEMBERSHIP APPLICATION

Building a stronger Republican Party in Loudoun County

Please complete the following form and mail with your check (payable to "LCRC") to:
LCRC · P.O. Box 547 · Leesburg, VA 20178

Name _____ Precinct _____

Street Address _____

Town _____ Zip Code _____

Home Phone _____ Mobile _____

E-mail _____

Social Security Number _____ (Optional. For voter identification purposes.)

Occupation* _____

Employer* _____ Town/State of Employer* _____

* Required by State Law

Dues (Check which membership you are applying for) \$ _____

Regular Membership (\$30) - Must meet attendance requirements

Associate Membership (\$15) - Non-voting member

Donation (Optional - to help elect Republican candidates) \$ _____

Total (Check payable to "LCRC") \$ _____

All legal and qualified voters, regardless of race, religion, color, national origin or sex, under the laws and ordinances of Loudoun County, the Commonwealth of Virginia and the United States of America, who are in accord with the principles of the Republican Party and who express in open meeting, if requested, their intent to support all of its nominees for public office in the ensuing election, may participate as members of the Republican Party of Loudoun County, Virginia in its Mass Meetings, Party Canvasses, Conventions, or Primaries in their respective Election Districts.

Signature _____ Date _____

Nominating LCRC Member _____ (Optional)