

Beaverton-Hillsboro Republican Women

MEMBERSHIP APPLICATION

Thank you for your interest in joining!
Your BHRW membership includes membership in
the OFRW (state) and the NFRW (national) clubs.

PLEASE PRINT CLEARLY

Select One:

Regular Member

*Associate Member

*must be a spouse of a regular member, state legislator
or regular member of another OFRW club

Date: _____

Name: _____

Address: _____

City (OR only): _____ Zip: _____

Home Phone: _____

Cell Phone: _____

Email: _____

Birthday (mm/dd only): _____

- **Regular Member Dues: \$25/year**
- **Associate Member Dues: \$15/year**

Please make check payable to BHRW

BHRW Dues: \$ _____

Additional Contribution: \$ _____

TOTAL ENCLOSED: \$ _____

Please check all that apply:

Registered Republican

Would like to volunteer

Previous member



Remit completed form and payment
during a BHRW meeting



bhrwmembership@gmail.com