



2022 Membership Form Republican Party of Marathon County

Type of Membership (circle one) NEW RENEWAL

- \$25.00 Family (individual + spouse/significant other)
- \$15.00 Individual
- \$5.00 Student (18-23 years of age)

Member #1

Name _____

Address _____

City _____ State _____ Zip _____

Cell _____ Home _____ Other _____

phone _____ phone _____ phone _____

E-mail _____

Occupation (must provide by law) _____

I am a veteran Yes No Active Yes No Branch _____

Member #2 (if applicable)

Name _____

Address _____

City _____ State _____ Zip _____

Cell _____ Home _____ Other _____

phone _____ phone _____ phone _____

E-mail _____

Occupation (must provide by law) _____

I am a veteran Yes No Active Yes No Branch _____

I would like to make a donation to sponsor:

Lincoln Day Dinner	Amount \$	_____
WI Valley Fair Booth	Amount \$	_____
Special Events	Amount \$	_____
Local Candidate Recruitment & Campaigns	Amount \$	_____
General Donation	Amount \$	_____

Contributions are not tax deductible

MAIL FORM & CHECK PAYMENT TO:
REPUBLICAN PARTY OF MARATHON COUNTY
PO BOX 834, WAUSAU, WI 54402

Membership will expire December 31 of the year submitted

Paid for by RPMC