2022 Membership Application

Republican Club of Solivita

A chartered club of the Republican Party of Florida

Annual Membership Dues are $15/person

APPLICATION TYPE (choose one)**:** **CURRENT MEMBER RENEWAL** ☐ **NEW MEMBER** ☐

LAST NAME _____

FIRST NAME (1) _____ *Please Print Clearly*

CELL PHONE # (_____) - _____ - _____

E-MAIL

Birthdate (Month/Day) _____/_____

FIRST NAME (2) _____ *Please Print Clearly*

CELL PHONE # (_____) - _____ - _____

E-MAIL

Birthdate (Month/Day) _____/_____

LOCAL ADDRESS _____Poinciana FL 34759

LOCAL PHONE # (_____) - _____ - _____

FULL TIME RESIDENT ☐ **PART TIME RESIDENT** ☐

Each calendar year begins January 1st with a kick-off at the January Annual Meeting.

If you wish, you may add to your dues a donation to the Scholarship Fund $_____

TOTAL PAYMENT ATTACHED $ _____

Make checks payable to: "RCS" or "REPUBLICAN CLUB OF SOLIVITA"

This membership form and dues check payment can be:

1) **Dropped off at an RCS ticket sales booth at Freedom Park on scheduled days**
2) **Dropped off at an RCS meeting**
3) **Mailed to the following address:**

REPUBLICAN CLUB OF SOLIVITA
P.O. BOX 580286
POINCIANA, FL 34758

Office use Only:

Amount: _____

CK#/CASH _____

Paid Date: _____