



***Democratic Women's Club of Martin County
Membership Application***

New Member

Renewal

Name: _____

Street Address: _____

City/State/Zip Code: _____

E-mail address: _____

Preferred Phone Number: _____ - _____ - _____

Date: _____

Annual dues: \$30. Pay by check or online.

If paying by check, make check payable to DWCMC. Mail it along with this application to:

**DWCMC
P.O. Box 592
Stuart, FL 34995-0592
Attn: Fran Rheinberger**

If paying online, go to our webpage at

<https://www.martincountydemocrats.org/dwcmc> and click on the "Click here to pay online" link. Mail in your completed application form and mark here that you paid online.