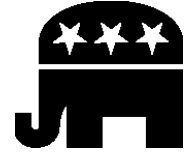


**CITY OF FAIRFAX
REPUBLICAN COMMITTEE
APPLICATION FOR MEMBERSHIP**



I am a registered voter in the City of Fairfax and do hereby officially request membership on the City of Fairfax Republican Committee.

_____ I have attached the \$ _____ Annual Fee for Membership.

ANNUAL DUES ARE \$20.00 PER YEAR if joining Mar.-Aug. \$20.00.

Dues are pro-rated for new member applications submitted Sept.-Nov. \$15.00; Dec.-Feb. \$10.00

_____ cash

_____ check (please make check payable to: **COFRC**)

_____ I have also included a voluntary contribution to the City of Fairfax Republican Committee to assist in their efforts to elect Republicans.

TOTAL ENCLOSED: \$ _____

_____ I would also like to help the City Committee in other ways. Please contact me about:
(please check all that apply)

_____ Serving as an officer or special committee chair.

_____ Assisting with the City Committee's annual events and activities

[] *Fall Festival* [] *Independence Day Parade*

_____ Being a Precinct or Block Captain (organize your precinct or neighborhood, training available)

_____ Working at the Polls on Election Day (typically a 1 to 2 hr. commitment)

_____ Making phone calls on behalf of the committee and/or Republican nominees.

_____ Literature drops in my precinct and/or neighborhood.

_____ Other _____

By my signature below, I pledge to support all Republican nominees in the November elections.

I further understand that it will be my responsibility to attend scheduled City Committee meetings called by the Chairman of the City of Fairfax Republican Committee. Should I miss three consecutive meetings, I understand that I will be automatically dropped from the membership roster. My duties as a member of the City Committee include, but are not limited to: actively working in my precinct, recruiting new members for the committee, identifying Republican voters, and encouraging them to get out and vote.

Signature _____ Date _____

PLEASE PRINT CLEARLY WHEN COMPLETING THE INFORMATION BELOW:

Full Name: _____ Goes By: _____

Address: _____, FAIRFAX, VA 220 _____

Precinct (if known): _____ Phone: _____ Email: _____

Occupation*: _____ Employer*: _____

*STATE AND FEDERAL LAW REQUIRES US TO REQUEST THIS INFORMATION. THIS INFORMATION IS USED FOR FINANCE REPORTING PURPOSES ONLY.

**Apply in person at any City Committee meeting
or mail it to: COFRC, Attn: Membership, PO Box 147, Fairfax, VA 22038**

The City of Fairfax Republican Committee usually meets the 3rd Thursday of the month, 10 times per year.
Potential members will be nominated at the first meeting after receipt of the Application for Membership, and elected at the next subsequent meeting. Applicants must be present to be elected to membership.

MEMBERSHIP YEAR RUNS APRIL THRU MARCH.

*Contributions are not deductible for federal tax purposes.
Paid for and authorized by the City of Fairfax Republican Committee, Anahita Renner, Chairman.*