



2018-19 Membership Form

LWV-Upper Mississippi River Region
Inter League Organization

Check One: New Member Renewing Member

Date: _____

NAME OF LOCAL/STATE LEAGUE: _____

OFFICE Address: _____ St _____ Zip _____

OFFICE or MAIN CONTACT Email: _____ Phone: _____

Number of Members, as of January 31, 2018 (this year): _____ (local leagues only)

YOUR CONTACTS: Please indicate the person(s) from your LWV to whom ILO information is to be sent {we have space for up to 3 here, but you can send us more information by email}

Name: _____

Address: _____

City _____ State _____ Zip _____

Phone _____ Email _____

Communications (check one or more)

Newsletters Program/Annual Mtg Info Membership/Renewal

Name: _____

Address: _____

City _____ State _____ Zip _____

Phone _____ Email _____

Communications (check one or more)

Newsletters Program/Annual Mtg Info Membership/Renewal

Name: _____

Address: _____

City _____ State _____ Zip _____

Phone _____ Email _____

Communications (check one or more)

Newsletters Program/Annual Mtg Info Membership/Renewal

Two Ways to Pay Your Membership! Choose one:

- 1) Send your completed form and check for \$25 (payable to LWV UMRR ILO) to:
LWV Upper Mississippi River Region ILO
c/o Jeri McGinley
516 Sunrise Avenue
Stevens Point, WI 54481

- 2) (NEW!) Pay online at www.lwvumrr.org

Office Use Only:
Date Rec'd: _____
Ck #: _____
Date to Membership: _____