



## Membership Application

\*NAME \_\_\_\_\_

\*ADDRESS \_\_\_\_\_

\*CITY \_\_\_\_\_ \*STATE \_\_\_\_\_ \*ZIP \_\_\_\_\_

E-MAIL \_\_\_\_\_

HOME # \_\_\_\_\_ CELL # \_\_\_\_\_ WORK # \_\_\_\_\_

\*EMPLOYER \_\_\_\_\_ \*OCCUPATION \_\_\_\_\_

COUNTY: \_\_\_\_\_ PRECINCT: \_\_\_\_\_ ELECTED OFFICE YOU HOLD \_\_\_\_\_

### VERIFICATION

\* Required fields. By my signature below, I certify I am over 18 years of age, and a U.S. Citizen or a permanent resident. Empower Women of Color NTX is a registered Political Action Committee. Donations are not tax-deductible.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please indicate your ethnicity if applying as a Woman of Color with Full Membership Rights:

Check Box: Black  Latino  Asian  Indigenous  Other WoC

Or, if applying as a Supporter (Not a Woman of Color), check here: Ally

SUPPORT LEVEL: \$25  \$50  \$75  Other  \$ \_\_\_\_\_

STUDENTS ONLY: \$15  NAME OF SCHOOL: \_\_\_\_\_

**Make checks payable to "Empower WoC NTX"**  
**Mail to WoC Treasurer, 3948 Legacy Drive, Suite 106 - 312, Plano, TX 75023**

\*\* Please charge to my credit card a donation to **Empower WoC NTX** for \$ \_\_\_\_\_

VISA       Mastercard       American Express       Discover

Credit Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name on credit card (if different from above) \_\_\_\_\_

Billing address (if different from above) \_\_\_\_\_

\*\*Your credit card donation will be processed through the secured ActBlue website. Then, information will be shredded or redacted.