



Join the Party!

2010 Membership Application

Single Payment Memberships
(Single contributions)

Individual \$25

Family \$50

Pioneer \$100

Trailblazer \$250

Regent \$500

President \$750

Sustaining Memberships
(Monthly Donations)

Pioneer \$10/mo

Trailblazer \$25/mo

Regent \$50/mo

President \$75/mo

Other \$ _____/month

Republican Leadership Council (RLC)

The RLC is comprised of a select group of members who are the foundation of the Harris County Republican Party. Please visit our website for a complete list of benefits included with RLC membership.

- | | | |
|-------------------------------------|--|---|
| <input type="checkbox"/> Member | <input type="radio"/> single payment \$1000 | <input type="radio"/> monthly payments \$85 |
| <input type="checkbox"/> Ambassador | <input type="radio"/> single payment \$2500 | <input type="radio"/> monthly payments \$210 |
| <input type="checkbox"/> Governor | <input type="radio"/> single payment \$5000 | <input type="radio"/> monthly payments \$420 |
| <input type="checkbox"/> Senator | <input type="radio"/> single payment \$10000 | <input type="radio"/> monthly payments \$840 |
| <input type="checkbox"/> President | <input type="radio"/> single payment \$25000 | <input type="radio"/> monthly payments \$2100 |

*Indicates information required for compliance purposes.

Name*		
Address*		
City State Zip*		
Ofc. Tel	Home	Cel
E-mail Address		
Occupation*		Employer*

Note: all Sustaining Memberships and monthly payment plans will renew automatically unless otherwise notified. Payment plans available only with monthly credit card draft.

Please charge my (circle one): Visa|Mastercard|Discover|American Express

Card # _____ Exp date: _____

Billing address (if different from above) _____

Check enclosed Single payment monthly payments of \$ _____

Signature _____

Recruited by: _____

The Harris County Republican Party accepts personal, PAC and corporate contributions. Donations are not deductible for income tax purposes.

Completed forms with charge card authorizations may be faxed to 713-838-7901. Otherwise, please mail to the address listed below.

Please make checks payable to: HCRP and mail to:
3311 Richmond, Ste 218 | Houston, Texas 77098
Tel. 713-838-7900 | Fax 713-838-7901
www.harriscountygop.com