



Student Associate Membership

National Federation of Republican Women

Contact: NFRW Membership Director
membership@nfrw.org or (800) 373-9688

Founded in 1938, the NFRW has thousands of active members in local clubs across the nation and in several U.S. territories, making it one of the largest women's political organizations in the country. The grassroots organization works to promote the principles and objectives of the Republican Party, elect Republican candidates, inform the public through political education and activity, and increase the effectiveness of women in the cause of good government.

The NFRW established a Student Associate Membership in 2006 to reach out to a younger generation of Republican women. The Student Associate Membership offers college women the opportunity to become part of the Federation at a "college friendly" rate. It is open to any woman attending an undergraduate or post-graduate college or university.

Benefits of becoming a Student Associate Member include:

- Enjoying an affordable membership fee
- Receiving the *Republican Woman* magazine
- Gaining experience in the national political arena
- Networking with established Republicans
- Associating with like-minded women
- Enhancing your political activism
- Accessing scholarship and internship opportunities
- Taking a Republican stance on your campus

To join, complete the following application and attach proof of your enrollment (ie., photocopy of a current student ID or class schedule). Submit these documents, along with your annual dues payment of \$15, to the NFRW by mail or fax. Or, sign up online at https://www.nfrw.org/cart/cart.php?set=showcontribution&contribution_id=12.

National Federation of Republican Women

Attn: Membership Director
124 North Alfred Street
Alexandria, Virginia 22314
Fax: (703) 548-9836

Thank you for your interest in the NFRW and for your commitment to the Republican Party. If you have questions, contact the NFRW at membership@nfrw.org or (800) 373-9688.



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APPLICATION

NAME _____

PERMANENT ADDRESS _____

CITY _____

STATE _____

ZIP _____

TELEPHONE _____

E-MAIL _____

COLLEGE / UNIVERSITY ADDRESS *(if different from above)* _____

CITY _____

STATE _____

ZIP _____

EXPECTED GRADUATION DATE *(mm/yy)* _____

EMPLOYER *(required by IRS)* _____

OCCUPATION *(required by IRS)* _____

PAYMENT OPTIONS

Check payable to the NFRW in the amount of \$15.00

Credit Card charged in the amount of \$15.00

Type: MasterCard VISA Discover American Express

Name on Card: _____

Number: _____

Security Code: _____

Expiration Date: _____

Billing Address *(if different from above):* _____

Signature: _____

Date: _____

*Contributions to the NFRW are not deductible as charitable contributions for federal income tax purposes.
Corporate, personal, and PAC checks are accepted.*