



## Student Membership

*National Federation of Republican Women*

Contact: NFRW Membership Director  
membership@nfrw.org or 703.548.9688

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Founded in 1938, the NFRW has thousands of active members in local clubs across the nation, 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 the Student Membership in 2006 to reach out to a younger generation of Republican women. The Student 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.

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 [www.nfrw.org/join](http://www.nfrw.org/join).

### **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. If you have questions, contact the NFRW Membership Director at [membership@nfrw.org](mailto:membership@nfrw.org) or 703.548.9688.

### **National Federation of Republican Women**

124 North Alfred Street | Alexandria, Virginia 22314  
703.548.9688 | 703.548.9836 FAX | [membership@nfrw.org](mailto:membership@nfrw.org) | [www.nfrw.org](http://www.nfrw.org)



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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.*