

MEMBERSHIP SURVEY

NAME _____ PHONE _____ FAX _____

DATE _____ EMAIL _____

ADDRESS _____

- NEW MEMBER (joined this year)
- CONTINUING MEMBER IN LAS VEGAS
- PREVIOUS MEMBER FROM ANOTHER STATE

How did you learn about the League of Women Voters?

Did another member invite you to a meeting? _____ if yes, who? _____

PLEASE LIST YOUR INTERESTS/HOBBIES/PROFESSION/AREAS OF EXPERTISE, ETC.

PLEASE CHECK THE COMMITTEES THAT INTEREST YOU:

- | | | |
|---|---|---|
| <input type="checkbox"/> AFFORDABLE HOUSING | <input type="checkbox"/> CRIMINAL JUSTICE | <input type="checkbox"/> EDUCATION |
| <input type="checkbox"/> ENVIRONMENT | <input type="checkbox"/> FUND RAISING | <input type="checkbox"/> HEALTH |
| <input type="checkbox"/> HISTORIAN | <input type="checkbox"/> JUVENILE JUSTICE | <input type="checkbox"/> LEGISLATIVE |
| <input type="checkbox"/> MEMBERSHIP | <input type="checkbox"/> NEWSLETTER | <input type="checkbox"/> VOTER SERVICES |

Return to:

League of Women Voters of Las Vegas Valley

P.O. Box 12291

Las Vegas, NV 89112

May be emailed to lwv@lwlasvegasvalley.org or brought to next meeting...*Thank You!*