

# WNPJS Membership Application

Is this a:

New Membership       Renewal       Not sure

## Type of Membership (annual)

Individual Member - \$35.00

Sustaining Member - \$52.00       A-dollar-a-day-for peace - \$365.00

Family - \$45.00       Fixed Income - \$10.00       Waived fee if you can't pay - \$0.00

Benefactor - enter amount: \_\_\_\_\_

Organization with paid staff - \$75.00

Organization without paid staff - \$50.00

**Name:** \_\_\_\_\_

*(For organization, enter contact person)*

**Name of Organization:** \_\_\_\_\_

*(if this is an Organization membership)*

## Area (for Organizations)

Statewide? Or enter your City, County, Region or Tribal area: \_\_\_\_\_

## Address:

*(Optional: but please include if you are joining as an Organization)*

\_\_\_\_\_  
\_\_\_\_\_

**Email:** \_\_\_\_\_

Please send me News and Action Alerts

**Phone:** \_\_\_\_\_

*(Optional: but please include if you are joining as an Organization)*

**U.S. Congressional District** \_\_\_\_\_

*(\*Find your representative at [house.gov/representatives](http://house.gov/representatives))*

**Wisconsin State Assembly District** \_\_\_\_\_ **Wisconsin State Senate District** \_\_\_\_\_

*(Find your Wisconsin legislators at [maps.legis.wisconsin.gov](http://maps.legis.wisconsin.gov))*

\_\_\_\_\_

Please return this form and make checks payable to WNPJS | PO Box 727 | Madison, WI 53701-0727  
or pay online at [wnpj.org/Donate-Join](http://wnpj.org/Donate-Join)