

2025 Committee Membership Form

Select one: Individual Me	embership (\$15) Family Member	rship (\$20)	
 consecutive meetings (prairies already a voting member) Associate member: Musicons 	e a resident of Colonial Heights; cannot roxy acceptable); must be elected by correct to be a resident of Colonial Heights; no dency in Colonial Heights not required	eurrent voting membership if not attendance requirements	
Member 1:			
Name:			
	City:	, VA Zip:	
Home phone:	Cell phone:		
Email:	Membership cate	Membership category:	
Member 2:			
Name:			
	City:	, VA Zip:	
Home phone:	Cell phone:		
Email:	Membership cate	Membership category:	
Member 3:			
Name:			
	City:		
Home phone:	Cell phone:		

Include additional members on the back of this form. Be sure to note the membership category!

Make checks payable to "Colonial Heights Republican Committee"

Email: _____ Membership category: _____