

Name_____

Address_____

City_____ Zip_____

Email_____

Home phone_____ Cell phone_____

Preferred Contact: Cell Text Email Home

** Please note on 7/1/24: we have removed the Sustaining Level. Please go to our online membership join/renew page to see information re: this change.

Membership Options:

_____ \$75 Individual (one year)

_____ \$40 Additional household member (one year, same address)

Name(s)_____

Email address(es)_____

_____ \$25 Student & Recent grad (one year)

_____ \$75 OR _____ \$25 Gift Membership for:

Name_____

Address_____

Phone/email_____

OR I'm using a sliding scale to set my dues at_____ (minimum \$20),
an amount that fits in my budget. (We don't want the amount of dues to be a barrier)

Please consider adding a donation for whatever amount works for you. Thank you!

Please make check payable to: **League of Women Voters Oakland**

Mail to: **P. O. Box 11055, Oakland CA 94611**

___ Please call me. I want to learn more about the League's work, volunteering, or membership.

The League of Women Voters of Oakland is a tax-exempt organization under Section 501c3 of the Internal Revenue Code. Contributions, including membership fees are tax deductible to the full extent permitted by law.

The League of Women Voters of Oakland is striving to better represent the city it serves. Please help us to track our progress by volunteering this information. Your response is optional.

Race or Ethnicity

Asian or Asian American

Black or African American

Hispanic or Latinx

Middle Eastern

Multiracial

Native American

Native Hawaiian

Pacific Islander

White

Not Listed _____

Year in which you were born _____