Membership Application Williamson Individual Annual Membership \$10.00 County Name Republican **Street Address** Leaders City/State/ZIP **Organization Telephone Number (Home/Mobile) Email Address** An Organization for all **Williamson County WCRL Member Sponsor** Republicans I certify I am over the age of 18 and a Republican. Please return completed application to monthly member meeting or send via email to WilcoRepublicanLeaders@gmail.com. Signature (Please see reverse for Oath of Affiliation)

Williamson County Republican Leaders Organization

Print Name

Oath of Affiliation

Signature

Date

I swear that I have not voted in a primary election or participated in a convention of another party during this voting year. I hereby state that I have affiliated myself with the Republican Party and I agree that The Williamson County Republican Leaders Organization shall have the right to make notice of my affiliation with the Republican Party public.