

# Libertarian Party Membership/Interest Form

Title:  Mr.  Mrs.  Ms.  Dr.

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

Greeting: \_\_\_\_\_

**Voter Registration Address****Mailing Address (if different)**

Addr1: \_\_\_\_\_

Addr1: \_\_\_\_\_

Addr2: \_\_\_\_\_

Addr2: \_\_\_\_\_

CSZ: \_\_\_\_\_

CSZ: \_\_\_\_\_

County: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Other Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

On which phone do you prefer to be contacted (home/work/other/day/eve.): \_\_\_\_\_

(Please indicate times that are good to reach you at each number and how late is too late to call.)

Please inform me of upcoming events and activities by the following method(s)

e-mail  postal mail  phone Instructions: \_\_\_\_\_

I would like to display these for the party or Libertarian candidates  bumper sticker(s)  yard sign(s)

I would like to volunteer for the Libertarian Party. I can help with:

- |  |  |
|--|--|
| <input type="checkbox"/> Outreach events (fairs, shows)        | <input type="checkbox"/> Envelope stuffing/mailer preparation                      |
| <input type="checkbox"/> Computer design (e.g. web/database)   | <input type="checkbox"/> Desktop publishing/graphic design                         |
| <input type="checkbox"/> Campaigns                             | <input type="checkbox"/> Media relations   |
| <input type="checkbox"/> Telephoning                           | <input type="checkbox"/> Legislative research/monitoring (federal, state or local) |
| <input type="checkbox"/> Petition/registration drive           | <input type="checkbox"/> Policy development  |
| <input type="checkbox"/> Public speaking                       | <input type="checkbox"/> Political event planning                                  |
| <input type="checkbox"/> Write and call legislators when asked | <input type="checkbox"/> Door-to-door outreach                                     |
| <input type="checkbox"/> Other: _____                          |  |

I am interested in becoming a candidate for public office.

I am interested in the following political issues \_\_\_\_\_

How did you hear about the Libertarian Party? \_\_\_\_\_

Become a member or contribute to the Libertarian Party! You will be supporting your county organization, as well as the state party. When you make a credit card pledge of at least \$10/month, you will receive membership and automatic renewal. Please check all that apply.

Yes, I will join the Libertarian Party!

Maryland only Membership \$ 20

Additional general contribution (thanks!) \$ \_\_\_\_\_

Total membership/general contribution: \$ \_\_\_\_\_

I want to join or extend my membership

with a monthly credit card pledge of: \$ \_\_\_\_\_

Payment method: \_\_\_\_\_

Check (payable to Libertarian Party of Maryland)

Credit (circle one) Visa MasterCard Discover

Card # \_\_\_\_\_

exp: \_\_\_\_\_

Signature \_\_\_\_\_

Federal law requires political committees to report the name, mailing address, occupation and employer for each individual whose contributions aggregate in excess of \$200 in a calendar year. Political contributions are NOT tax deductible.

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_